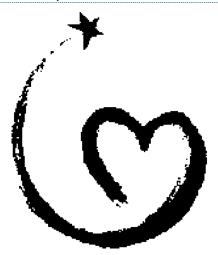
Draft CCDF Preprint for Public Comment 9-14-15



Child Care and Development Fund (CCDF) Plan for State/Territory California FFY 2016-2018

This Plan describes the CCDF program to be administered by the State/Territory for the period 6/1/2016 – 9/30/2018. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described. For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

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Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children - who rely on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees that enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub.L. 113-186)

(https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_markup.pd f). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

CCDF Plan Overview. The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families' access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption and implementation of these important changes are done in a thoughtful and comprehensive manner.

The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period. (658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

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- 1. Define CCDF Leadership and Coordination with Relevant Systems
- 2. Promote Family Engagement through Outreach and Consumer Education
- 3. Provide Stable Child Care Financial Assistance to Families
- 4. Ensure Equal Access to High Quality Child Care for Low-Income Children
- 5. Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings
- 6. Recruit and Retain a Qualified and Effective Child Care Workforce
- 7. Support Continuous Quality Improvement
- 8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of high quality care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine need for technical assistance and CCDF Plan amendments, and ultimately determine compliance with specific requirements and deadlines.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

CCDBG Implementation Deadlines. In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission, the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)
- Current status for any requirement in this section (not yet started, partially implemented, substantially implemented, other) including describing progress to date for any requirements already implemented and listing any unmet requirements that are not yet fully implemented

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- Specific steps (activities) you will take to complete implementation of the unmet requirement(s)
 (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.)
- Timeline for implementation including projected start date and end date for each step
- Agency/entity responsible for completing implementation of the goal/objective, and partners
 who will work with the responsible agency to complete implementation of the goal/objective.

We recognize that it will take multiple steps and interim activities toward complete implementation of the requirement. We have included spaces to allow respondents to outline those interim steps and associated timelines (projected start and end dates) for those interim steps to be outlined. A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct ongoing reviews of implementation plans until fulfillment of the requirement. As part of the ongoing reviews, States and Territories will be asked to complete regular updates to the implementation plan through the e-submission site. Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date of the requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02 and corresponding timeline of effective dates https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-States-and-Territories-ccdbg-act-of-2014).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: https://childcareta.acf.hhs.gov/ccdf-reauthorization In addition to these materials, States and Territories will continue to receive support through the Office of Child Care's Technical Assistance Network (CCTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing CCDBG compliance monitoring efforts. In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

1.1.1	Identify ACF wi Plan ap	Lead Agency is designated to administer the CCDF program? y the Lead Agency or joint inter-agency office designated by the State/Territory Il send official grant correspondence such as grant awards, grant adjustments, oprovals, and disallowance notifications to the designated contact identified 658D(a))
		Name of Lead Agency California Department of Education
		Address of Lead Agency 1430 N Street, Sacramento, California 95814
		Name and Title of the Lead Agency Official Tom Torlakson, State

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		Phone Number 916-319-0800
		E-Mail Address superintendent@cde.ca.gov
		Web Address for Lead Agency (if any) http://www.cde.ca.gov
1.1.2	Identify contact program annour designa equal o	the CCDF administrator? The CCDF administrator designated by the Lead Agency, the day-to-day To the person with responsibility for administering the State/Territory's CCDF The common acceptance of the programmatic communications such as program The common acceptance of the program instructions, and data collection instructions to the program instructions and data collection instructions to the program instruction of the program of the contact identified here. If there is more than one designated contact with a shared responsibility for administering the CCDF program, please identify the program of the contact in the contact
	a)	Contact Information for CCDF Administrator: Name of CCDF Administrator: Debra McMannis Title of CCDF Administrator: Director, Early Education and Support Division Address of CCDF Administrator: 1430 N Street, Sacramento, California 95814 Phone Number: 916-324-0730 E-Mail Address: dmcmannis@cde.ca.gov
	b)	Contact Information for CCDF Co-Administrator (if applicable): Name of CCDF Co-Administrator Title of CCDF Co-Administrator Phone Number E-Mail Address Description of the role of the Co-Administrator
	c)	Primary Contact Information for the CCDF Program: Phone Number for CCDF program information (for the public) (if any) 916-322-6233
		Web Address for CCDF program (for the public) (if any) http://www.cde.ca.gov/sp/cd/
		Web Address for CCDF program policy manual (if any)
		Web Address for CCDF program administrative rules (if any)
1.1.3	of CCDI	the agency/department/entity that is responsible for each of the major parts administration and the name of the lead contact responsible for managing tion of the Plan.
		Outreach and Consumer Education (section 2): o Agency/Department/Entity California Department of Education

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	o Name of Lead Contact Marguerite Ries
	Subsidy/Financial Assistance (section 3 and section 4) o Agency/Department/Entity California Department of Education o Name of Lead Contact Marguerite Ries
	Licensing/Monitoring (section 5): o Agency/Department/Entity California Department of Social Services o Name of Lead Contact Shanice Boyette
	Child Care Workforce (section 6): o Agency/Department/Entity California Department of Education o Name of Lead Contact Cecelia Fisher-Dahms
	Quality Improvement (section 7): o Agency/Department/Entity California Department of Education o Name of Lead Contact Cecelia Fisher-Dahms
	Grantee Accountability/Program Integrity (section 8): o Agency/Department/Entity California Department of Education o Name of Lead Contact Guadalupe Romo-Zendejas
The Lead Age implement ac other public o	ecision Authority ncy has broad authority to administer (i.e., establish rules) and operate (i.e., tivities) the CCDF program through other governmental, non-governmental, or r private local agencies as long as it retains overall responsibility for the n of the program. (658D(b))
State/T rules ar operate	of the following CCDF program rules and policies are set or established at the erritory versus the local level? In other words, identify whether CCDF program d policies are established by the State or Territory (even if administered or d locally) or whether the CCDF policies or rules are established by local entities counties or workforce boards) setting those policies. Check one.
⊠ lev	All program rules and policies are set or established at the State/Territory I.
	Some or all program rules and policies are set or established by local entities. lecked, indicate which entities establish the following policies. Check all that ly.
	☑ Eligibility rules and policies (e.g., income limits) are set by the:☑ State/Territory
	County. If checked, describe the type of eligibility policies the county can set

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 Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity (ies) can set Other. Describe
✓ Sliding fee scale is set by the:✓ State/Territory
County. If checked, describe the type of sliding fee scale policies the county can set
Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity (ies) can set
Other. Describe
Payment rates are set by the: State/Territory
County. If checked, describe the type of payment rate policies the county can set
Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set
Other. Describe
Other. List and describe (e.g., quality improvement systems, payment practices)
1.2.2 How is the CCDF program operated in your State/Territory? In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing differences in eligibility or other policies across counties or other jurisdictions to ease family burden and confusion. Check all that apply and describe the services performed by the entity and how the State/Territory ensures accountability that federal requirements are fully implemented by other agency(ies).
a) Who determines eligibility?
CCDF Lead Agency
TANF agency. Describe
Other State/Territory agency. Describe

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	 ✓ Local government agencies such as county welfare or social services departments. Describe. Public and private agencies under contract with the California Department of Education (CDE), including local educational agencies. ✓ Child care resource and referral agencies. Describe
	○ Community-based organizations. Describe. Public and private agencies under contract with CDE
	Other. Describe. Public and private agencies under contract with the CDE, including local educational agencies.
b)	Who assists parents in locating child care (consumer education)?
	CCDF Lead Agency
	TANF agency. Describe
	Other State/Territory agency. Describe
	□ Local government agencies such as county welfare or social services departments. Describe. Public and private agencies under contract with the CDE, including local educational agencies.
	Child care resource and referral agencies. Describe. Public and private agencies under contract with the CDE, including local educational agencies.
	Community-based organizations. Describe. Public and private agencies under contract with the CDE, including local educational agencies.
	Other. Describe. Public and private agencies under contract with the CDE, including local educational agencies.
c)	Who issues payments?
	CCDF Lead Agency
	TANF agency. Describe
	Other State/Territory agency. Describe
	□ Local government agencies such as county welfare or social services departments. Describe. Public and private agencies under contract with the CDE, including local educational agencies.
	Child care resource and referral agencies. Describe.

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Community-based organizations. Describe. Public and private agencies under contract with the CDE, including local educational agencies.

Other. Describe. Public and private agencies under contract with the CDE, including local educational agencies.

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301 cspan govts def 3.pdf
The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

- 1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply). For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.
 - ☑ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns Describe: The Early Education and Support Division, (EESD) held a stakeholders meeting in order to gather input for the 2016-18 CCDF state plan on September 14, 2015. Over 30 state agency representatives, stakeholder organizations and quality contractors attended the meeting and provided input to the development of the state plan. The EESD facilitated a similar meeting for another opportunity to gather input at a stakeholder meeting to review the draft State Plan on January 27, 2016.

The CDE also consults with local governments by means of its Child Care and Development Local Planning Councils (LPCs). The LPCs bring all the local stakeholders together, including subsidized and non-subsidized early care and education providers, employers, county welfare departments (CWDs) and human services agencies, local educational agencies (LEAs), regional centers, colleges, California Children and Families Commission (First 5 California), job training programs, and parent organizations to create local strategic priorities for child care services for children and families.

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☑ [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe:
The requirements of the reauthorization of the CCDBG and implementation plans were discussed at the October 22, 2014; January 13, 2015; April 22, 2015; and October 28, 2015, State Advisory Council Meetings, where stakeholders were advised of the updates and changes on the preprint, as well as advised of the many opportunities for input via email, mail, and fax. The January 27, 2016 meeting was dedicated to opportunities for public testimony on the state's draft.
 o If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council? ☑ Yes ☐ No.
o If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross- agency commission, or council or cabinet related to child and family planning and policy
☑ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with. The CDE State liaison that works closely with the Tribal Child Care Association of California (TCCAC) will update this section after consultation with the chairs to ensure an accurate list of tribes and tribal organizations.
Check N/A if no Indian Tribes and/or Tribal organizations in the State
☐ State/Territory agency responsible for public education. Describe
☐ State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe
$\hfill \square$ State/Territory institutions for higher education, including community colleges. Describe $\underline{\hspace{1cm}}$
☐ State/Territory agency responsible for child care licensing. Describe
$\hfill \square$ State/Territory office/director for Head Start State collaboration. Describe

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□ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe
☐ State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe
☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe
☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe
☐ State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe
☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe
\square McKinney-Vento State coordinators for Homeless Education. Describe
\Box State/Territory agency responsible for public health. Describe
\square State/Territory agency responsible for mental health. Describe
☐ State/Territory agency responsible for child welfare. Describe
\square State/Territory liaison for military child care programs. Describe
☐ State/Territory agency responsible for employment services/workforce development. Describe
☐ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe
☐ State/community agencies serving refugee or immigrant families. Describe
☐ Child care resource and referral agencies. Describe
☐ Provider groups or associations. Describe
☐ Labor organizations. Describe
☐ Parent groups or organizations. Describe
☐ Other. Describe

- 1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:
 - a) Date(s) of notice of public hearing:

Notice for the January 9, 2015, hearing was given on December 23, 2014. Notice for the October 8, 2015 Topical Input Sessions was given on October 2, 2015. Notice for the January 12, 2015, hearing was given on December 23, 2015.

Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.

The CDE shared information about methods of input to the State Plan via the EESD listerv, posting information on the CDE web site, and at over 20 meetings of stakeholder groups, advocacy organizations and membership organizations to encourage broad and diverse input. To ensure the notice was accessible for the people with disabilities, the information was posted on the CDE's website, which meets the Americans with Disabilities Act requirements, and public notices complied with the California open meeting law, The Bagley-Keene Act. The CDE had established an email account designated for year round input at statepln@cde.ca.gov where a consultant is dedicated to replying to emails, and organizing the input, into designated state plan areas. The designated CDE web site for CCDBG is, http://www.cde.ca.gov/sp/cd/re/ccdfstplnhear1618.asp

c) Date(s) of public hearing(s)

Formal public hearings were held on January 9, 2015 and January 12, 2016. Topical Input Sessions were held midterm on October 8, 2015 regarding (list 3 topics). Public hearings were held on January 12, 2016.

Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed

The CDE web site, http://www.cde.ca.gov/sp/cd/re/ccdfstplnhear1618.asp contains federal, and state level resources and information, it houses contact information for formal input, including past and current opportunities for in person input sessions. Based on stakeholder input the CDE began presenting remotely via remote satellite hosts across the state to allow for local input. A total of nine remote satellite locations were listed and hosted on October 8, 2015. Locations are listed on the CDE's website, and are updated regularly. Also based on stakeholder input, the CDE has moved to a webinar format that is recoded,

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transcribed, meets American Disability Act accessibility standards, and housed on the same site, for year round access.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s)

A draft of the 2016-18 State Plan was made available on the CDE's website, and was linked to in an e-blast to the EESD e-mail distribution list which includes CDE contractors, providers, stakeholders, advocates, and members of the public.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?

The CDE reviews the public testimony, e-mails, and correspondence to determine if the issue is included in the proposed CCDF State Plan, or if it warrants further investigation.

- 1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe the strategies below, including any relevant links as examples.
 - ✓ Working with advisory committees. Describe:

The CDE EESD regularly attends quarterly meetings for the following groups: State Advisory Council, SSPI Stakeholder Group, AB 104 Stakeholder Groups, and Tribal Child Care Association of California (TCCAC). Time was allotted for input at each of these meetings.

Working with child care resource and referral agencies. Describe:
 The California Resource and Referral Network participated in all public hearings and topical input sessions and the CDE hosted a meeting with network staff on February 27, 2015.

	network staff on February 27, 2015.
	Providing translation in other languages. Describe:
\boxtimes	Making available on the Lead Agency website. List the website: http://www.cde.ca.gov/sp/cd/re/stateplan.asp
	Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe: Shared through our email listserv, which includes CDE contractors, providers stakeholders, advocates, and members of the public.
	Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: Through the listserv, topical input sessions, public hearings, presentations at meetings and conferences
	Other. Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

- 1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(0)) Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.
 - ☑ [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.). Describe:
 The CDE contracts with direct-service providers to administer the California State Preschool Program (CSPP). The program provides both part-day and full-day services that provides a core class curriculum that is developmentally, culturally, and linguistically appropriate for the children served. The program also provides meals and snacks to children, parent education, referrals to health and social services for families, and staff development opportunities to employees. The program is administered through local educational agencies, colleges, community-based organizations, and private nonprofit agencies.
 - ☑ [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with:

 The CDE meets with tribal early childhood programs, via the CCDF Roundtable meetings, quarterly. Additionally, the CDE goals of this coordination include enhancing and aligning quality of services, linking comprehensive services to children in child care settings and examining program funding and eligibility requirements to expand access.

☐ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.

☐ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe:

Coordination with the Map to Inclusive Child Care Project (Map Project) began in state fiscal year (FY) 1998–99. Stakeholders in the Map Project include representatives from early childhood programs, Head Start (HS), CDE's Special Education Division, key state agencies such as the California Departments of Developmental Services, Social Services, and Mental Health, and professional organizations providing support services for children with disabilities and their families. The MAP to Inclusive Child Care and Center on the Social and Emotional Foundations for Early Learning (CSEFEL) website, http://www.cainclusion.org/camap/, has been an ongoing activity in California's CCDF State Plan. The purpose is to expand opportunities for inclusion of children with disabilities and other exceptional needs in child care settings.

☑[REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act). Describe:

Most subsidized child care programs administered by the CDE, including those supported by the CCDF, follow the eligibility and need criteria described in *Education Code* Section 8263 (partial citation included below), which includes access for homeless children.

Education Code Section 8263:

- (a) The Superintendent shall adopt rules and regulations on eligibility, enrollment, and priority of services needed to implement this chapter. In order to be eligible for federal and state subsidized child development services, families shall meet at least one requirement in each of the following areas:
 - (1) A family is (A) a current aid recipient, (B) income eligible, (C) homeless, or (D) one whose children are recipients of protective services, or whose children have been identified as being abused, neglected, or exploited, or at risk of being abused, neglected, or exploited.
 - (2) A family needs the child care services (A) because the child is identified by a legal, medical, or social services agency, or emergency shelter as (i) a recipient of protective services or (ii) being neglected, abused, or exploited, or at risk of neglect, abuse, or exploitation, or (B) because the parents are (i) engaged in vocational training leading directly to a recognized trade, paraprofession, or profession, (ii) employed or seeking employment, (iii) seeking permanent housing for family stability, or (iv) incapacitated.

- (b) Except as provided in Article 15.5 (commencing with Section 8350), priority for federal and state subsidized child development services is as follows:
 - (1) (A) First priority shall be given to neglected or abused children who are recipients of child protective services, or children who are at risk of being neglected or abused, upon written referral from a legal, medical, or social services agency. If an agency is unable to enroll a child in the first priority category, the agency shall refer the family to local resource and referral services to locate services for the child.
 - (B) A family who is receiving child care on the basis of being a child at risk of abuse, neglect, or exploitation, as defined in subdivision (k) of Section 8208, is eligible to receive services pursuant to subparagraph (A) for up to three months, unless the family becomes eligible pursuant to subparagraph (C).
 - (C) A family may receive child care services for up to 12 months on the basis of a certification by the county child welfare agency that child care services continue to be necessary or, if the child is receiving child protective services during that period of time, and the family requires child care and remains otherwise eligible. This time limit does not apply if the family's child care referral is recertified by the county child welfare agency.
 - (2) Second priority shall be given equally to eligible families, regardless of the number of parents in the home, who are income eligible. Within this priority, families with the lowest gross monthly income in relation to family size, as determined by a schedule adopted by the Superintendent, shall be admitted first. If two or more families are in the same priority in relation to income, the family that has a child with exceptional needs shall be admitted first. If there is no family of the same priority with a child with exceptional needs, the same priority family that has been on the waiting list for the longest time shall be admitted first. For purposes of determining order of admission, the grants of public assistance recipients shall be counted as income.

CDE and SSPI Goals for Improving Access for Homeless Families:

In addition, the CDE and R&R agencies may provide child care information and homeless rights to parents, providers, early learning programs, agencies, local educational agencies, and any other agencies

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in a user-friendly format. This can be through poster dissemination, newsletters, and other means of communication.

The CDE and R&R agencies may provide training to local educational agencies (LEAs) regarding child care policies, procedures, and collaboration with the child care programs in their areas. This would include the LEA liaisons to identify homeless child care-age children and then inform those providers.

The CDE may provide resources and training on the definition of homelessness (according to McKinney-Vento), identification, and services to homeless children and their families.

The CDE will continue the collaboration and coordination between the Early Education and Support Division and the homeless education program.

In supporting the above goals, the State Superintendent of Public Instruction (SSPI) issued a letter on December 9, 2015 stating how the federal law titled The McKinney-Vento Homeless Assistance Act (title 42 United States Code Section 11431 et seq.) and how it impacts Head Start and the CDE's Early Education and Support Division (EESD) contractors.

Within the CDE an internal collaboration of the Homeless Education program, the California Head Start State Collaboration Office (CHSSCO) and EESD have shared responsibilities through federal law to coordinate and collaborate at the state level to provide information and resources to best serve California's most vulnerable population, including children and families who are homeless.

The outcome of this CDE internal partnership is to foster and encourage local connections and outreach to homeless children and families by providing education and resources to the field.

Most subsidized child care programs administered by the CDE, including those supported by the CCDF, follow the eligibility and need criteria described in *Education Code* Section 8263 (partial citation included below), which includes access for children in foster care.

Education Code Section 8263:

(a) The Superintendent shall adopt rules and regulations on eligibility, enrollment, and priority of services needed to implement this chapter. In order to be eligible for federal and state subsidized child

development services, families shall meet at least one requirement in each of the following areas:

- (1) A family is (A) a current aid recipient, (B) income eligible, (C) homeless, or (D) one whose children are recipients of protective services, or whose children have been identified as being abused, neglected, or exploited, or at risk of being abused, neglected, or exploited.
- (2) A family needs the child care services (A) because the child is identified by a legal, medical, or social services agency, or emergency shelter as (i) a recipient of protective services or (ii) being neglected, abused, or exploited, or at risk of neglect, abuse, or exploitation, or (B) because the parents are (i) engaged in vocational training leading directly to a recognized trade, paraprofession, or profession, (ii) employed or seeking employment, (iii) seeking permanent housing for family stability, or (iv) incapacitated.
- (b) Except as provided in Article 15.5 (commencing with Section 8350), priority for federal and state subsidized child development services is as follows:
 - (1) (A) First priority shall be given to neglected or abused children who are recipients of child protective services, or children who are at risk of being neglected or abused, upon written referral from a legal, medical, or social services agency. If an agency is unable to enroll a child in the first priority category, the agency shall refer the family to local resource and referral services to locate services for the child.
 - (B) A family who is receiving child care on the basis of being a child at risk of abuse, neglect, or exploitation, as defined in subdivision (k) of Section 8208, is eligible to receive services pursuant to subparagraph (A) for up to three months, unless the family becomes eligible pursuant to subparagraph (C).
 - (C) A family may receive child care services for up to 12 months on the basis of a certification by the county child welfare agency that child care services continue to be necessary or, if the child is receiving child protective services during that period of time, and the family requires child care and remains otherwise eligible. This time limit does not apply if the family's child care referral is recertified by the county child welfare agency.
 - (2) Second priority shall be given equally to eligible families, regardless of the number of parents in the home, who are

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income eligible. Within this priority, families with the lowest gross monthly income in relation to family size, as determined by a schedule adopted by the Superintendent, shall be admitted first. If two or more families are in the same priority in relation to income, the family that has a child with exceptional needs shall be admitted first. If there is no family of the same priority with a child with exceptional needs, the same priority family that has been on the waiting list for the longest time shall be admitted first. For purposes of determining order of admission, the grants of public assistance recipients shall be counted as income.

П	State/Territory agency responsible for child care licensing. Describe
	State/Territory agency with Head Start State collaboration grant. Describe
	State Advisory Council authorized by the Head Start Act. Describe
	State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe
	McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe
	Child care resource and referral agencies. Describe
	State/Territory agency responsible for public education. Describe
	State/Territory institutions for higher education, including community colleges. Describe
	State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe
	State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe
	Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe
	State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe
	Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe
	State/Territory agency responsible for public health. Describe

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	State/Territory agency responsible for mental health. Describe
	State/Territory agency responsible for child welfare. Describe
	State/Territory liaison for military child care programs. Describe
_	State/Territory agency responsible for employment services/workforce development. Describe
Ц	State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe
	State/Territory community agencies serving refugee or immigrant families. Describe
	Provider groups or associations. Describe
	Labor organizations. Describe
	Parent groups or organizations. Describe
	Other. Describe

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii)) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits

(https://www.whitehouse.gov/omb/circulars/a133 compliance supplement 2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative

programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

☑ Yes. If yes, describe at a minimum:

o How do you define "combine":

The CDE is required to disburse all child development funds for direct services through a contracting process. Some contracts are funded with a combination of CCDF and State General Fund.

Which funds will you combine:
 CCDF and State General Fund

 Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations:

CDE utilizes all fund sources to maximize the availability of quality services available to provide services for as many children as possible.

 Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?):

State Level

How are the funds tracked and method of oversight:

The CDE has systems and processes in place for budgeting, accounting, monitoring and auditing to accommodate the requirements associated with this grant. The CDE Accounting Office prepares and submits the quarterly Administration for Children and Families (ACF)-696 to report outlays and unliquidated obligations in accordance with the Federal reporting requirements established for the Mandatory, Matching, and Discretionary grants. Accounting Office staff prepare and reconcile various worksheets using data from the State of California's Accounting and Report System and information provided by the Child Development Fiscal Services Unit.

☐ No

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level – State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services.

The CDE has established an ongoing relationship with First 5 California (F5CA). The CDE shares in the vision with F5CA to fund programs that educate parents, grandparents, caregivers, and teachers about the critical role they play during a child's first five years. The CDE shares the promise of F5CA to continue to invest in integrated programs and resources designed to benefit three target audiences: the Child, the Teacher, and the Parent.

http://www.first5california.com/default.aspx.

The CDE works closely with the California Department of Public Health (CDPH) to create and maintain the linkage between child care and health care. The state provides services for pregnant women and children through various programs: Medi-Cal (California's Medicaid program) BabyCal, Access for Infants and Mothers, and the Healthy Families Program. Together, these three programs cover children up to 250 percent of the federal poverty level, and pregnant women and their infants up to 300 percent of the federal poverty level.

The CDPH, the CDE, and the California Department of Social Services (CDSS) have worked to address the growing concern about the immunization of children. The link between health care and child care is strengthened by the requirement that children be immunized at the appropriate age before being enrolled in child care settings. The CDHS, the CDE, and the CDSS have worked to assist programs in attaining higher immunization rates among children. On June 30, 2015 Governor Brown signed Senate Bill (SB) 277. SB 277 becomes effective January 2016, requiring students to provide immunization records to their child care settings or schools, and in turn child care settings or schools will continue to report to the CDPH the immunization status of all students at the existing check points of child care, kindergarten and 7th grade.

The CDE has established an ongoing communication mechanism with tribes in California, both CCDF-funded and otherwise, to facilitate and consult on early childhood issues and the delivery of services to all tribal children and families in the State. The CDE coordinates child care and development services with tribal organizations by providing information and access to the State's child care and development services, training programs, and complimentary dissemination of materials. The CDE will continue to work with Tribal CCDF grantee representatives to:

- 1) Increase and expand access to information about early care and education as well as identify available training and technical assistance on these topics;
- 2) Actively promote early care and education and identification of ways to engage children and families in the education system;
- 3) Identify opportunities for funding and explore ways to promote and leverage existing resources;
- 4) Promote access to products and activities of the EESD;
- 5) Support and promote their participation in the Race to the Top-Early Learning Challenge (RTT-ELC) Consortia and in the local Quality Rating and Improvement Systems (QRIS);
- 6) Include representation in the RTT-ELC Consortia state-level meetings as well as in specific workgroups (e.g., Family Engagement); and
- 7) Engage in dialogue to help build the cultural appropriateness of the RTT-ELC Hybrid matrix and its corresponding Quality Improvement and Professional Development Pathways.

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems

States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations (CCR&R) that is coordinated, to the extent determined by the State/Territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds. (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care
 assistance to offer the families support and assistance in making an informed
 decision about child care options in an effort to ensure families are enrolling their

children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory

- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith- based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

Nothing in statute prohibits States from using CCR&R agencies to conduct or provide additional services beyond those required by statute above.

- 1.7.1 Does the State/Territory fund a system of local or regional CCR&R organizations?
 - ☑ Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4. If yes, describe the State/Territory's written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&Rs. California Resource and Referral Program (CRRP) Funding Terms and Conditions contain language requiring activities such as:
 - The R&R programs provide information and technical assistance to parents using license-exempt providers and to license-exempt individuals on the TrustLine Registry background check program.
 - Parents are given advice on questions to ask their families' potential child care providers and what they should look for as indicators of quality child care services.
 - Parents may be given written consumer education materials or receive an opportunity to view a video regarding the selection of a child care provider.
 - Parents are also advised regarding the types of subsidized child care and development programs for which their families may be eligible and ways to access those programs.

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 R&R program services are available to all families regardless of the family's income or need for child care.

These can be found at: http://www.cde.ca.gov/fg/aa/cd/ftc2014.asp. Supply and demand data is collected quarterly and posted on the CDE website at http://www.cde.ca.gov/sp/cd/re/ccannualreports.asp

□ No. The State/Territory does not fund a CCR&R system and has no plans to establish. Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States and Territories must include a **Statewide Child Care Disaster Plan** for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.
- 1.8.1 Describe the status of State/Territory's Statewide Child Care Disaster Plan.
 - ☐ Fully implemented and meeting all Federal requirements outlined above. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan
 - ☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
 September 30, 2016
- Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 Other- The State is currently working to contract and partner with other agencies to develop and plan processes that will result in a Disaster Plan to serve as an annex to the official State Office of Emergency Preparedness Plan for California. The plan will be complete by September 30, 2016. Development activity will be completed by June 30, 2016. Parallel best practices and recommendations will be developed and presented for consideration to the appropriate entities in the event of any legislative or regulatory steps deemed necessary to support the plan.
 - Implementation progress to date Identify any requirement(s) partially or substantially implemented
 On July 1, 2015, the contractor initiated collaboration and coordination of disaster and emergency planning activities with the state and federal early care and education (ECE) and child care partner agencies, stakeholders and emergency/disaster preparedness content experts. Development activity will be completed by June 30, 2016 although it is anticipated that the collaborative work will continue.

On July 1, 2015, the contractor began writing a draft of the statewide Disaster and Emergency Plan for ECE Programs with input from CDE, existing Health and Safety Regulatory Workgroup, the Disaster and Emergency Preparedness subgroup, stakeholders and content experts. This annex to the Office of Emergency Preparedness Plan draft document activity will be completed by June 30, 2016.

- Unmet requirement Identify the requirement(s) not fully implemented:
 In March 2016, the contractor will develop relevant disaster and
 - emergency planning activities tailored for California drafts of educational and disaster plan informational materials for use by ECE providers. Activity will be completed and posted for use on June 30, 2016.
- Tasks/Activities What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - The contractor will develop relevant drafts of educational and disaster plan informational materials tailored for California for use by its ECE providers.

- Projected start date for each activity March 1, 2016
- o Projected end date for each activity June 30, 2016
- Agency Who is responsible for complete implementation of this activity
 - California Department of Education
- Partners Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

University of California, San Francisco under contract with the California Department of Education working in collaboration with California Governor's Office of Emergency Services

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12.

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

- 1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
 - a) the availability of child care assistance,
 - b) the quality of child care providers (if available),
 - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children

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(WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.

- d) Individuals with Disabilities Education Act (IDEA) programs and services,
- e) Research and best practices in child development, and
- f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.
- 2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
 - a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
 - b) Aggregate annual information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
 - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

2.1 Information about Child Care Financial Assistance Program Availability and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services. (658E(c)(2)(E)(i)(1))

- 2.1.1 Describe how the State/Territory informs families of availability of services.
 - a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)
 - California maintains a large system of over 71 R&R agencies that are providing services in every county in the state. In large urban counties, multiple R&R agencies are funded. For example, Los Angeles County has eight R&R agencies. R&R agencies maintain an up-to-date list of active licensed child care. The CDSS is

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required by law to inform the R&Rs of any license change in status to include temporary suspension, license revocation or probation.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

When a family enters CalWORKs, the County Welfare Department (CWD), they are given provider information or the family is referred to a local R&R agency for assistance in finding child care. These referral services may be co-located in or are directly accessible from the CWD office. Resource and Referral (R&R) programs help parents understand the full range of options including their potential eligibility for CCDF subsidy services.

The California Child Care Resource and Referral Network maintains a statewide bilingual (English and Spanish) toll-free telephone number (1-800-KIDS-793) that automatically provides the caller with the phone number of the local R&R agency when the caller provides his/her zip code. The caller may also speak with an information specialist. Parents can also link to their local R&R via the CDE website, as well as other agency websites.

In addition, many CDE, EESD contracted centers reach out to families in their communities' through various advertising formats.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?

The CDE contracts with the R&R programs to maintain an updated file of all licensed child care programs (centers and family child care homes) in their service delivery area. The R&R programs also provide information and technical assistance to parents using license-exempt providers and to license-exempt individuals on the TrustLine Registry background check program. The CDE also does electronic outreach via the CDE website.

www.cde.ca.gov

2.1.2 Ho	w can parents apply for services? Check all that apply.
	\Box Electronically via online application, mobile app or email. Provide link
	□ In-person interview or orientation. Describe agencies where these may occur Alternative Payment (AP) Programs, and CDE Direct Services contracted centers and providers.
	⊠Phone
	☐ Mail
	☐ At the child care site

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□ At a child care resource and referral agency
☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe
☐ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe
☐ Other strategies. Describe

2.2 Consumer and Provider Education Information

The CCDBG Act of 2014 added a purpose of the child care program "to promote involvement by parents and family members in the development of their children in child care settings." (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

- 2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:
 - Information about the availability of the full diversity of child care services that will promote informed child care choices,
 - Availability of child care assistance,
 - Quality of child care providers (if available),
 - Other programs (specifically Temporary Assistance for Needy Families (TANF),
 Head Start and Early Head Start, Low-Income Home Energy Assistance
 Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP),
 Women, Infants and Children (WIC) program, Child and Adult Care Food
 Program (CACFP), Medicaid and State Children's Health Insurance Program
 (SCHIP)) for which families may also qualify,
 - Individuals with Disabilities Education Act (IDEA) programs and services,
 - Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement,
 - State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of

preschool-aged children (children from birth to five for purposes of this

requirement)) in early childhood programs receiving CCDF. ☐ Yes. The State/Territory certifies that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.8 below. ☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report. Overall Target Completion Date (no later than September 30, 2016) Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Implementation progress to date – Identify any requirement(s) partially or substantially implemented Unmet requirement - Identify the requirement(s) not fully implemented Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Projected start date for each activity Projected end date for each activity _____ Agency – Who is responsible a) Describe how the State/Territory makes information about the full diversity of child care services available to parents of eligible children, providers and the general public: The CDE contracts with 71 Child Care Resource and Referral (R&Rs) agencies throughout the state. R&Rs are located in each county of the state and provide access to the full diversity of child care services, training and information. They help families find child care that best meets their needs, recruit and train child care providers, and collect data from parents and child care providers. R&Rs provide a variety of services to parents seeking care, to providers seeking professional development and incentives for remaining in the profession, and to

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communities seeking support for their youngest residents. A 1-800 1-800-KIDS-793 (1-800-543-7793) line is available to assist in finding child care. A California map to link to each

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county's R&R can be found at: http://www.cde.ca.gov/sp/cd/re/rragencylist.asp. In an effort to strengthen parent education efforts, the state is working with a contractor to design, develop, and produce on-line Consumer Education R&R Counselor Training Video Modules. The development of the phone counselor modules will take place in March 2016. Under California Education Code section 8212, R&Rs are required to provide the following:

- Identification of the full range of existing child care services through information
 provided by all relevant public and private agencies in the areas of service, and the
 development of a resource file of those services which shall be maintained and
 updated at least quarterly. These services shall include, but not be limited to, family
 day care homes, public and private day care programs, full-time and part-time
 programs, and infant, preschool, and extended care programs. The resource file
 shall include, but not be limited to, the following information:
 - a. Type of program.
 - b. Hours of service.
 - c. Ages of children served.
 - d. Fees and eligibility for services.
 - e. Significant program information.
- 2. a. Establishment of a referral process which responds to parental need for information and which is provided with full recognition of the confidentiality rights of parents. Resource and referral programs shall make referrals to licensed child day care facilities. Referrals shall be made to unlicensed care facilities only if there is no requirement that the facility be licensed. The referral process shall afford parents maximum access to all referral information. This access shall include, but is not limited to, telephone referrals to be made available for at least 30 hours per week as part of a full week of operation. Every effort shall be made to reach all parents within the defined geographic area, including, but not limited to, any of the following:
 - 1) Toll-free telephone lines.
 - 2) Office space convenient to parents and providers.
 - Referrals in languages which are spoken in the community.
 Each child care resource and referral program shall publicize its services through all available media sources, agencies, and other appropriate methods.
 - b. 1) Provision of information to any person who requests a child care referral of his or her right to view the licensing information of a licensed child day care facility required to be maintained at the facility pursuant to Section 1596.859 of the Health and Safety Code and to access any public files pertaining to the facility that are maintained by the State Department of Social Services Community Care Licensing Division.
 - 2) A written or oral advisement in substantially the following form will comply with the requirements of subparagraph (1):

"State law requires licensed child day care facilities to make accessible to the public a copy of any licensing report pertaining to the facility that documents a facility visit or a substantiated complaint investigation. In addition, a more complete file regarding a child care licensee may be available at an office of the State Department of Social Services Community Care Licensing Division. You have the right to access any public information in these files."

- 3. Maintenance of ongoing documentation of requests for service tabulated through the internal referral process. The following documentation of requests for service shall be maintained by all child care resource and referral programs:
 - a. Number of calls and contacts to the child care information and referral program or component.
 - b. Ages of children served.
 - c. Time category of child care request for each child.
 - d. Special time category, such as nights, weekends, and swing shift.
 - e. Reason that the child care is needed. This information shall be maintained in a manner that is easily accessible for dissemination purposes.

The California Department of Social Services (DSS), Community Care Licensing (CCL), Child Care Program has a variety of sources to meet this need, including:

- DSS Child Care Licensing Website –The Child Care Licensing Website makes available searchable information, resources and links for individuals seeking to become licensed, existing licensed providers, parents, and the general public: http://ccld.ca.gov/PG411.htm
- 2. DSS Facility Search Website The DSS Facility Search Website makes available multiple ways to search for a specific facility and to review that facility's compliance record: https://secure.dss.ca.gov/CareFacilitySearch/
- 3. DSS Child Care Licensing Regional Offices There are 13 regional offices located across California where parents and the general public can access information about facilities and compliance records in person or by phone. Providers may receive an in-person child care orientation and other assistance with the licensing process. Additionally anyone may phone these local offices during business hours to speak with the "officer of the day" who is a licensing program analyst and is available to provide information and answer licensing related inquiries.
- 4. DSS Community Care Licensing, Central Complaint and Information Bureau The Central Complaint and Information Bureau is a statewide hotline made available to anyone by calling 1-844-LET-US-NO (538-8776). The hotline was initiated in 2015,

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and is a centralized call center that receives and disseminates facility complaints to the regional offices and answers licensing related inquiries.

- 5. DSS Office of Horizontal Integration The Office of Horizontal Integration within the Department of Social Services exists to provide coordination, communication and interaction between and among programs, projects and departments.
- 6. Online modules are being developed using Race to the Top Early Learning Challenge funds to make licensing information for parents and providers available which can be viewed free online. These modules are expected to become available by June of 2016 and will cover content regarding licensing regulations, policies and best practices.
- 7. DSS Child Care Licensing Advocates The Child Care Advocates are state licensing staff who provide a link between the child care licensing program and the child care community including providers. The Advocates promote the delivery of quality child care by:
 - a. disseminating information regarding the State's licensing role
 - b. acting as a liaison to businesses, education groups, provider organizations, other child care programs and the Resource and Referral Agencies
 - c. assisting county governments and community agencies in capacity building and quality improvement efforts
 - d. and in coordinating complaints and concerns to the state on behalf of children, parents and providers
- 8. Resource and Referral Network Agencies (R&Rs) The R&Rs are located in each county of the state and provide access to the full diversity of child care services, training and information. DSS is required by law to inform the R&Rs of their existing licensed facilities and any related compliance actions. Providers may receive training and assistance via R&Rs, while parents may receive referrals to facilities, as well as information and access to child care resources.
- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

As noted in the legal requirements of *Education Code* section 8212, Resource and Referral agencies (R&Rs) provide written or oral information about the availability and diversity of child care options in their respective communities. California R&Rs are focused on providing services that are culturally and linguistically responsive to inquiring families.

For licensed providers, the DSS Child Care Licensing Website provides searchable online information which includes:

1. Laws and Regulations governing child care licensing in California

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- 2. The Evaluator Manual which is used by licensing staff
- 3. Information on caregiver background checks and California's Trustline Registry
- 4. Quarterly Newsletter updates
- 5. Assessment Guides
- 6. Fact Sheets
- 7. Online Provider Orientations
- 8. Translated Forms and Publications in more than 20 different languages
- 9. Child care tools and resources
- 10. Licensing forms
- 11. DSS staff contact directories
- 12. Online access for providers to pay licensing fees
- 13. Web links and direct referrals to the R&Rs, the Facility Search Website and county offices.

The DSS Licensing Regional Offices provide:

- In-Person
 - Assistance with the licensing process and related inquiries
 - Access to facility records by appointment
 - Child care orientations by appointment
- Over the Phone
 - Assistance with the licensing process and related inquiries
 - Access to facility record files
- Inspections to licensed facilities
 - o Clarification of licensing laws and regulations
 - Assistance with the licensing process and related inquiries
 - o References to child care related resources

The DSS Child Care Licensing Advocates provide information regarding:

- The state's licensing role
- Best child care practices
- Quality improvement efforts
- Current child care issues and events
- Capacity building

- Provider business resources
- c. Describe who you partner with to make information about the full diversity of child care choices available:

The CDE partners with the DSS and its Welfare-to-Work Bureau regarding CalWORKs Child Care Stage One and its Community Care Licensing Division regarding licensed child care, as well as the R&R Network partnership described in the previous sections.

For licensed providers, DSS partners with the:

- 1. Child Care Community including businesses, education groups, and provider organizations. This partnership is fulfilled through the DSS Child Care Licensing Advocates and the Licensing Regional Offices throughout the state.
- 2. R&Rs to provide access to the full diversity of child care services, training and information. DSS is required by law to inform the R&Rs of their existing licensed facilities and any related compliance actions. Providers may receive training and assistance via R&Rs, while parents may receive referrals to facilities, as well as information and access to child care resources.
- 3. Quality Rating and Improvement Systems to provide diverse choices for quality child care. DSS licensure is considered the base measure upon which the Quality Rating and Improvement System is built.
- 2.2.2 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand
 - a) Describe how the State/Territory makes information about child care quality available to parents of eligible children, providers and the general public California R&Rs are required to provide information to parents and the public about the quality of child care services. Using RTT-ELC funds, a quality child care communication plan is underway and will be completed by September 30, 2016. General information about quality is provided at the CDE website at the following location: http://www.cde.ca.gov/sp/cd/re/caqintro.asp.
 - b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)
 Many R&R agencies provide written materials including a check list for reviewing programs. All provide direct communication.
 - c) Describe who you partner with to make information about child care quality available:

The CDE partners with the California R&R Network.

2.2.3 Describe how the State/Territory shares information with eligible parents about other available human service programs. For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

The local CWDs and front line workers utilize the Online California Work Opportunity and Responsibility to Kids (CalWORKs) Appraisal Tool (OCAT) to connect clients to supportive services including Supplemental Nutrition Assistance Program (SNAP), Women Infant and Children (WIC), Children's Health Insurance Program (CHIP) and Medicaid. OCAT is a web-based appraisal tool used statewide to assess clients for needs, barriers, strengths and capacity to work.

California's Welfare to Work (WTW) program is designed to assist welfare recipients to obtain or prepare for employment. The welfare to work program serves all 58 counties in the state and is operated locally by each county welfare department (CWD) or its contractors.

CWDs provide information to clients during the initial intake process via a universal application. Counties collect this data in various forms such as the CalWORKs Information Network (CalWIN). CalWIN is an online web-based resource for eligible clients and providers to obtain a collection of services such as health care, food programs, energy assistance/housing programs, TANF and child care services. This resource also allows clients to directly apply for TANF, SNAP and Medicaid. The system stores Welfare Client Data that allows workers to process online benefit requests from clients.

https://www.mybenefitscalwin.org/#

CWDs also refer clients to their local Child Care Resource & Referral (R&R) and Alternative Payment Programs (APPs). Resource and Referral programs provide information to all parents and the community about the availability of child care in their area. This includes State and Federally Funded Child Care Programs such as the California State Preschool Program and Head Start and Early Head Start programs.

The California Department of Social Services (CDSS) is committed to improving service delivery to CDSS clients by facilitating, coordination, communication and interaction between and among programs, projects, and departments. CDSS has created the Office of Horizontal Integration who strives to help break down silos, assist with collaboration, and seek out opportunities to better serve our common clients. Our core principal is to view, serve and treat the client/customer holistically.

The State of California is committed to promoting technologies that improve and expand services through communication, data sharing and interdepartmental collaboration. California's Statewide Automated Welfare System (SAWS) is made up of multiple systems which support such functions as eligibility and benefit determination, enrollment, and case maintenance at the county level for some of the State's major health and human services programs. The consortia

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include, LA Eligibility Automated Determination, Evaluation and Reporting System (LEADER), CalWORKs Information Network (CalWIN) and Consortium IV (C-IV).

a) Temporary Assistance for Needy Families (TANF)

Local R&Rs collaborate with CWDs, sometimes this requires a Memorandum of Understanding between the agencies.

b) Head Start and Early Head Start Programs

Local R&Rs connect with Head Start (HS), Early Head Start (EHS), and Early Head Start – Child Care Partnerships to assist parents to access their services.

c) Low Income Home Energy Assistance Program (LIHEAP)

Local R&Rs assist low income families to assess the LIHEAP.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps) Local R&Rs collaborate with CWDs to assist families to enroll in SNAP.

e) Women, Infants, and Children Program (WIC)

Local R&Rs assist low income families to access WIC.

f) Child and Adult Care Food Program (CACFP)

CDE, EESD-contracted direct service providers utilize the CACFP. Families need to be income eligible for these services, but families do not need to apply for CACFP to be provided with information about healthy nutrition.

g) Medicaid

Local R&Rs, APPs, and CDE, EESD-contracted providers assist families in accessing Medicaid (CalWORKS), as well as accessing subsidized health care coverage via the Covered California program.

h) Children's Health Insurance Program (CHIP)

Local R&Rs, APPs, and CDE, EESD-contracted providers assist families in accessing CHIP.

i) Individuals with Disabilities Education Act (IDEA)

Local R&Rs, APPs, CDE, EESD-contracted providers, Regional Centers, and LEAs assist families to access IDEA Part B and Part C by ensuring that all eligible children receive an Individualized Education Plan (IEP) or Individualized Family Support Plan (IFSP).

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)

Local R&Rs and APPs assist families in accessing other state funded child care programs like State Preschool.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

The consumer education modules being developed for R&R phone counselors will include all of the above (a-j) with the addition of information about state and county home visiting services, as well as family resource centers.

- 2.2.4 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?
 - a) Temporary Assistance for Needy Families (TANF) CDSS provides information on how to assess services on its website at http://www.cdss.ca.gov/cdssweb/PG181.htm, which includes cash aid. CDSS also licenses child care programs, so programs know to go to the CDSS site. The local R&R can assist providers in making the connection to their local CWD.
 - b) Head Start and Early Head Start Programs

The CDE holds the grant for the California Head Start State Collaboration Office. The CHSSCO aim is to facilitate collaboration and connections between HS and EHS grantees and state services. Local R&Rs share information about HS and EHS grantees in local service areas. http://www.cde.ca.gov/sp/cd/re/chssco.asp

- c) Low Income Home Energy Assistance Program (LIHEAP)
 Local R&Rs share information about the LIHEAP with providers.
- d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

Local R&Rs collaborate with CWDs to assist families to enroll in SNAP

- e) Women, Infants, and Children Program (WIC)
 Local R&Rs share information about the WIC with providers.
- f) Child and Adult Care Food Program (CACFP) Local R&Rs and APPs (those who manage the child care voucher program) assist child care providers to assess CACFP.
- g) Medicaid Local R&Rs and APPs assist child care providers to assess Medicaid.
- h) Children's Health Insurance Program (CHIP)
 Local R&Rs share information about the CHIP with providers.
- i) Individuals with Disabilities Education Act (IDEA) Local R&Rs share information about the IDEA Parts B and C with providers and make referrals to the appropriate LEA or Regional Center.
- j) Other State/Federally Funded Child Care Programs (example-State Pre-K) Local R&Rs share information about the full range of child care services including state EESD-contracted programs (i.e., Child Care and Development Centers, Family Child Care Home Education Networks, California State Preschool Programs, Migrant Center Programs, Severely Disabled Programs,

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CalWORKs Child Care Stages 1-3, and Alternative Payment Programs) and Tribal CCDF programs.

- k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)
 - Local R&Rs share information about state and county home visiting programs
- 2.2.5 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))
 - a) Describe how the State/Territory makes information about research and best practices in child development available to parents of eligible children, providers and the general public

 Parents, the general public, and providers are provided information of the best practices in child development through a parent-friendly website, All About Young Children: Information for Families on Children's Early Development, which can be found at http://allaboutyoungchildren.org/. This website provides information in eight languages about what skills help children learn how they learn language, how they learn about feelings and relationships, how they learn about numbers, and how they become skillful at moving their bodies. The CDE has extensive research-based publications, online modules, and DVDs for providers on these topics.
 - b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) The CDE provides parent-friendly information about recent research in child development in All About Young Children. This website includes printable downloads. https://allaboutyoungchildren.org/ Information is provided in the eight most utilized languages in California.
 - c) Describe who you partner with to make information about research and best practices in child development available

 The EESD, Quality Improvement Professional Development providers all utilize California's research based foundations, frameworks, and program guidelines.

 Local R&Rs are the primary point of contact for child development information with parents and the general public. The CDE contracts with the Program for Infant Toddler Care, the California Preschool Instructional Network, and its other professional development providers to provide information and best practices about child development.
- 2.2.6 Describe how information on the State/Territory's policies regarding the socialemotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in

early childhood programs receiving CCDF is collected and disseminated to parents, providers and the general public. (658E(c)(2)(E)(i)(VII))

a) Describe how the State/Territory makes information regarding socialemotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to parents of eligible children, providers and the general public. At minimum, describe what you provide (e.g., early childhood mental health consultation services to child care programs) and how (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents

All about Young Children and local R&Rs are the vehicle for CDE's primary contact with parents.

ii. Providers

California Collaborative for Social-Emotional Foundations for Early Learning (CSEFFEL) provides training and coaching regarding the teaching pyramid with its focus on positive social-emotional interactions between young children and providers. The California Inclusion and Behavior Consultation Network provides support for Child Care Providers regarding children with challenging behaviors and inclusion issues. Family Child Care at its Best has two training modules on the CSEFEL Teaching Pyramid for family child care providers.

http://www.cainclusion.org/camap/

iii. General public

All about Young Children and local R&Rs are the CDE's primary contact

b) Describe any partners used to make information regarding socialemotional/behavioral and early childhood mental health of young children available

Many county First 5 Commissions provide services related to children's mental health.

c)	Does the State have a written policy regarding preventing expulsion of: Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?
	Yes. If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link
	⊠No.
	☐ School-age children from programs receiving child care assistance?

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 \boxtimes No.

Yes. If yes, describe how the State/Territory makes
information about that policy available to parents, providers
and the general public (what you provide, how you provide
and any partners used) and provide a link

2.2.7 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening resources and services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays. Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

- ☐ Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency policy citation(s) and:
 - a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened
 - b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays
- ☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Current Status Describe the State/Territory's status toward completion implementation for any requirement(s) not fully

implemented (not yet started, partially implemented, substantially implemented, other)

Partially implemented

Implementation progress to date – Identify any requirement(s) partially or substantially implemented:

All Medicaid eligible children have access to Early and Periodic Screening Diagnosis and Treatment (EPSDT). California does have a screening collaborative which has developed procedures and recommendations for comprehensive developmental screening for California's children. The California QRIS rating matrix includes an element regarding developmental screening. At the highest level tier, programs work with families to screen all children using the Ages and Stages Questionnaire (ASQ) & ASQ-SE (Social Emotional), if indicated, at program entry, then as indicated by results thereafter.

Program staff use children's screening results to implement intervention strategies and adaptations as appropriate

Unmet requirement - Identify the requirement(s) not fully implemented

California currently does not have a state wide system for providing information on and referring families to existing developmental screening services.

 Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

To establish a statewide database or clearinghouse for developmental screenings or referrals.

- Projected start date for each activity TBD
- Projected end date for each activity
 Two years following initiation of the project.
- Agency Who is responsible for complete implementation of this activity

California Department of Public Health

 Partners – Who is the responsible agency partnering with to complete implementation of this activity?
 California Department of Developmental Services; and Early Education and Support Division and Special Education Division of the California Department of Education.

- 2.2.8 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))
 - a) How does the State/Territory define substantiated parental complaint
 For licensed child care facilities, a complaint that is "substantiated" means
 that the allegation is valid because the preponderance of the evidence
 standard has been met. The facility is cited and the appropriate action taken.
 The complaint may have come from a parent or anyone concerned.
 - How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

For licensed child care facilities, the DSS maintains records of substantiated complaints for at least the previous five years in the following formats:

- 1. In a DSS internal database
- 2. In hard file copy at the licensing regional offices
- 3. Online at the DSS Child Care Facility Search Website.

In programs operated by school districts, if a parent has a complaint regarding program operations not covered by licensing requirements, the parent must utilize the uniform complaint procedures established by the school district. Records of substantiated complaints are kept by the school district.

For licensed child care facilities, the CDE uses the Notice of Action (NOA) to inform the parent of the following: The parent may appeal the NOA to the contractor and, if necessary, to the EESD within a 14/19 day timeframe. Termination of serviced is suspended during the appeal process. The EESD reimburses the contractor for services provided to the family during the appeal process.

c) How does the State/Territory make substantiated parental complaints available to the public on request

For licensed child care facilities, substantiated complaints are made available to the public at the Regional Offices and are accessible by phone or by inperson appointment. Reports are maintained in hard copy at the Regional Office for at least five years or longer.

In addition, the reports for substantiated complaint investigations have also become available online at the DSS Facility Search Website. Those reports are viewable for inspections that were completed by fall of 2015, and will remain available for at least five years.

d) Describe how the State/Territory defines and maintains complaints from others about providers

For licensed child care facilities, complaints from others about providers are maintained in the same manner.

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In programs operated by school districts, if a parent has a complaint regarding program operations not covered by licensing requirements, the parent must utilize the uniform complaint procedures established by the school district. In programs operated by entities other than school districts, a parent may file complaints regarding program operations not covered by licensing requirements with the CDE, EESD. The parent must utilize the uniform complaint procedures established by the CDE, EESD. More information about this process can be found at http://www.cde.ca.gov/re/cp/uc/ Records of these parental complaints are mainlined at the EESD for seven years.

Complaints against License-Exempt Providers:

Certificate programs are required to maintain a record of parental complaints concerning a license-exempt provider's failure to meet the health and safety standards as specified in the Health and Safety Self-Certification that is completed by the parent and license-exempt provider. These complaints shall be deemed to be substantiated solely by the parent's written declaration. The written declaration shall include the nature of the complaint and inform the provider about whom the complaint is made and shall be signed by the parent. The certificate program shall inform the license-exempt provider of the parent's complaint and inform the provider of his or her right to submit a written rebuttal. If a request is made concerning a specific license-exempt provider, the certificate program shall inform the requestor of the general nature of the complaint and whether or not the provider submitted a rebuttal. Upon receipt of a complaint, the certificate program must notify the parent and the provider that payments will cease in 14 days unless a written declaration signed by both parties has been received by the certificate program stating that the health and safety deficiency has been corrected. The certificate program will also advise parents that serious health and safety concerns should be referred to the appropriate child protection unit of the CWD.

2.2.9 How will the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language?

Check the strategies, if any, that your State/Territory has chosen to implement.



Informational materials in non-English languages Several DSS licensing child care forms and publication are translated into over 20 different languages: http://www.dss.cahwnet.gov/cdssweb/FormsandPu_274.htm R&Rs provide informational materials in the languages of their communities, please refer to the California Resource and Referral Network at http://www.rrnetwork.org/

	Website in non-English languages
	□ Lead Agency accepts applications at local community-based locations
	Bilingual caseworkers or translators available
	Bilingual outreach workers Local R&Rs provide information in various languages to serve their respective communities. DSS regional offices currently employ bilingual staff persons who assist eligible families with facility information in those regions where 5% or more of the regional office client population speaks a primary language other than English.
	Partnerships with community-based organizations Many local R&Rs partner with county First 5 commissions.
	Other All About Young Children website in 8 different languages: http://allaboutyoungchildren.org
2.2.10	None If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages The CDE provides applications in the following languages: Chinese (simplified), Chinese (traditional), Hmong, Korean, Filipino (Tagalog), Spanish, Vietnamese. Additional support is provided locally by R&R programs and training providers provide services in languages to meet their community's needs. For Department of Social Services, the top three languages for translation are: Spanish, Cantonese, and Armenian. In addition, DSS has language services to provide translation services that are available as needed.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing the State/Territory processes for licensing and monitoring child care providers, processes for conducting criminal background checks as required by law (see section 5.3), and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse in child care settings.

The State/Territory also must make public certain information about the results of such monitoring as required by law for both licensed and unlicensed providers receiving CCDF (see section 5.2) on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and

Territories must post the results of the monitoring and inspection reports on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

- 2.3.1 Describe the status of State/Territory's consumer education website.
 - ☑ Fully implemented and meeting all Federal requirements outlined above. Provide the link to the website https://secure.dss.ca.gov/CareFacilitySearch/ and describe how the consumer education website meets the requirements to:
 - a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe
 For licensed child care facilities, this information is available on the DSS Facility Search website identified above.
 - b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers
 For licensed child care facilities, this information is available on the Child Care Licensing website at: http://ccld.ca.gov/PG398.htm
 - c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers For licensed child care facilities, this information is searchable on the Child Care Licensing website.
 - d) Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings
 For licensed child care facilities, DSS collects these statistics (in aggregate for all deaths, injuries, and abuses) but has not yet made them public.
 - e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request, differentiating between violations based on risk to children, and easy to locate and navigate
 For licensed child care facilities, searchable information including: defining exempt care; corrective action plans (called "Plan of Correction" in California);

and frequently asked questions; is provided within the Child Care Licensing

Child Care Licensing Website also links to the DSS Facility Search Website which allows for multiple ways to search for providers and also differentiates between violations based on risk to the children (e.g. Type A and Type B

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violations): https://secure.dss.ca.gov/CareFacilitySearch/

Website: http://ccld.ca.gov/PG411.htm.

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 Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with the requirement, including planned activities, necessary legislative or regulatory stote complete, and target completion date. Please provide brief text responses descriptions only. Do not cut and paste charts or tables here. Your responses consolidated electronically into an Implementation Plan summary report. Overall Target Completion Date (no later than September 30, 2016 for components of the website except posting the results of the monitor the website which is November 19, 2017) 						
imp	rent Status – Describe the State/Territory's status toward complete lementation for any requirement(s) not fully implemented (not yet ted, in progress, partially completed, substantially completed, other)					
	 Implementation progress to date – Identify any requirement(s) partially or substantially implemented 					
	 Unmet Requirement(s) – Identify the requirement(s) that is not fully implemented 					
requ	ks/Activities – What specific steps will you take to implement the uirement (e.g., legislative or rule changes, modify agreements with rdinating agencies, etc.)					
	o Projected start date for each activity					
	o Projected end date for each activity					
	 Agency – Who is responsible for complete implementation of this activity 					

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents' options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the

Partners – Who is the responsible agency partnering with to

complete implementation of this activity _____

full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase- out of assistance. The definition of an eligible child includes that a family's assets may not exceed \$1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

At the point in time when eligibility is determined, children must (1) be under the age of 13, (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size, and whose family assets do not exceed \$1,000,000 (as certified by a member of such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves children from $\underline{0}$ (weeks/months/years) to $\underline{13}$ years (through age 12).
b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B)), 658P(3))
Yes, and the upper age is 19 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity — The child who is physically or mentally incapable of self-care is a child who has exceptional needs as defined in California Education Code (EC) Section 8208(I) and needs adult supervision in a child care setting.
☐ No.
c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))
Yes, and the upper age is (may not equal or exceed age 19)

- 3.1.2 How does the Lead Agency define the following eligibility terms?
 - a) residing with –Living in the same household.
 - b) in loco parentis

Any adult living with the child who has responsibility for the care and welfare of the child.

- 3.1.3 Eligibility Criteria Based on Reason for Care
 - a) How does the Lead Agency define "working, attending job training and education" for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).
 - Working

As defined under the term "workday" in *Education Code* Section 8208 (ah) "Workday" means the time that the parent requires temporary care for a child for any of the following reasons:

- (1) To undertake training in preparation for a job.
- (2) To undertake or retain a job.
- (3) To undertake other activities that are essential to maintaining or improving the social and economic function of the family, are beneficial to the community, or are required because of health problems in the family.

Work is defined as employment, self-employment or vocational education leading directly to a recognized trade, paraprofession, or profession. Travel time is included in the approved schedule of services- (5 CCR Section 18086(e)(1))

Attending job training

Vocational training leading directly to a recognized trade, paraprofession or profession (5 CCR Section 18087)

Attending education

Vocational training leading directly to a recognized trade, paraprofession or profession (5 CCR Section 18087)

b)	Does the Lead Agency allow parents to qualify for CCDF assistance or
	the basis of education and training participation alone (without
	additional minimum work requirements)?
	∑ Yes.
	No. If no, describe additional requirements

c) Does the Lead Agency provide child care to children in protectiv services?					
	Yes. If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a brief description below. 1) Definition of protective services — Children at risk of abuse, neglect, or exploitation" defined in EC				
	Section 8202 (k) as children who are so identified in a written referral from a medical, or social service agency, or emergency shelter.				
	2) Does the Lead Agency waive the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis? (658E(c)(5)) Yes. No.				
	Note – If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for purposes of CCDF these children are considered to be in protective services and should be included in the protective services definition above.				
	□ No				
3.1.4 Eligibili	ty Criteria Based on Family Income				
	How does the Lead Agency define "income" for the purposes of eligibility at the point of determination?				
	• Definition of income – Income counted to determine eligibility includes all sources of income to the family (S CCR Section 18096) with the exceptions noted below. According to EC Section 8263.1 a family is "income eligible" if a family's adjusted monthly income is at or below 70 percent of the				

(a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI. Note − If the income eligibility limits are not statewide, check here ∑. Describe how many jurisdictions set their own income eligibility limits 2: San Francisco, San Mateo, and Alameda counties,

state median income (SMI), adjusted for family size, and updated annually. Per legislative directions, the 2007 SMI is currently used.

b) Provide the CCDF income eligibility limits in the table below. Complete columns

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upon approval from CDE. Fill in the chart based on the most populous area of the state.

Family	(a)	(b)	(c)	(d)	(e)	(f)
Size						
	100% of	85% of State	(IF APPLICABLE)	(IF APPLICABLE)	(IF APPLICABLE)	(IF APPLICABLE)
	State	Median	\$/month	% of SMI	\$/month	% of SMI
	Median	Income	Maximum	[Divide (c) by (a),	Maximum "Exit"	
	Income	(SMI)	"Entry" Income	multiply by 100]	Income Level if	multiply by 100]
	(SMI)	(\$/month)	Level if lower	Income Level if	lower than 85%	Income Level if
	(\$/month)	[Multiply (a)	than 85%	lower than 85%	Current SMI	lower than 85%
		by 0.85]	Current SMI	Current SMI		Current SMI
1	\$4,691	\$3,987	\$3 ,2 83	70%	N/A	N/A
2	\$4,691	\$3,987	\$3 ,2 83	70%	N/A	N/A
3	\$5,026	\$4,272	\$3,518	70%	N/A	N/A
4	\$,5584	\$4,746	\$3,908	70%	N/A	N/A
5	\$6,477	\$5,506	\$4,534	70%	N/A	N/A

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal poverty guidelines are available at http://aspe.hhs.gov/poverty/index.cfm.

- c) SMI Source and year California Department of Finance, 2007
- d) These eligibility limits in column (c) became or will become effective on July 1, 2011. The information in the table above reflects the eligibility limits established on July 1, 2011 by the Legislature and Governor.
- e) Provide the link to the income eligibility limits http://www.cde.ca.gov/sp/cd/ci/mb1106.asp

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv))

Describe the status of the State/Territory's policy regarding graduated phase-out of assistance.

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	the Lead	emented and meeting all Federal requirements outlined above. List Agency's policy citation(s) and describe the policies and procedures ated phase-out					
	plan for a activities completion response response	emented. The State must provide a State-specific implementation achieving compliance with this requirement, including planned, necessary legislative or regulatory steps to complete, and target on date (no later than September 30, 2016). Please provide brief text is and descriptions only. Do not cut and paste tables here. Your is here will be consolidated electronically into an Implementation mary report.					
•	Overall Target Completion Date (no later than September 30, 2016)						
•	implem started Subsidi income the two would	t Status – Describe the State/Territory's status toward complete nentation for any requirement(s) not fully implemented (not yet, partially implemented, substantially implemented, other) zed child care in California, supported by CCDF, utilizes the same eligibility thresholds for enrollment and disenrollment, other than popilot districts authorized by legislation. A change to this policy require legislative and gubernatorial approval. To date, no proposals seen put forward to change this policy.					
	0	Implementation progress to date – Identify any requirement(s) partially or substantially implemented Not Implemented					
	0	Unmet requirement - Identify the requirement(s) not fully implemented					
•	(e.g., le	Activities – What steps will you take to implement the requirement egislative or rule changes, modify agreements with coordinating es, etc.)					
	0	Projected start date for each activity					
	0	Projected end date for each activity					
	0	Agency – Who is responsible for complete implementation of this activity California Department of Education, upon direction from the Legislature and Governor.					
	0	Partners – Who is the responsible agency partnering with to complete implementation of this activity					

3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory's (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II))

Note – this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory's policy related to the fluctuation in earnings requirement.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement _____
 Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than

September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 - Subsidized child care law and regulation in California, supported by CCDF, do not allow for a regular fluctuations of earnings if those fluctuations cause income levels to exceed the income eligibility thresholds. A change to this policy would require legislative and gubernatorial approval. To date, there are no proposals to change this policy.
 - Implementation progress to date Identify any
 requirement(s) partially or substantially implemented

Not Implemented

• Unmet requirement - Identify the requirement(s) not fully implemented

Subsidized child care law and regulation in California, supported by CCDF, do not allow for a regular fluctuations of earnings if those fluctuations cause income levels to exceed the income eligibility thresholds. A change to this policy would require legislative and gubernatorial approval. To date, there are no proposals to change this policy.

 Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Subsidized child care in California, supported by CCDF, utilizes the same income eligibility thresholds for enrollment and disenrollment, other than the three pilot districts authorized by legislation. A change to this policy would require legislative and gubernatorial approval. To date, no proposals have been put forward to change this policy.

0	Projected start date for each activity			
0	Projected end date for each activity			
0	Agency – Who is responsible for complete implementation of this activity California Department of Education			
0	Partners – Who is the responsible agency partnering with to complete implementation of this activity			
3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.				

A parent provides the names of parents and names, gender, and birthdates of the children identified in the family. The number of children is documented by providing at least one of the following documents, as applicable: birth certificates; court orders regarding child custody; adoption documents; records of foster care placements; school or medical records; CWD record; or other reliable documentation indicating the relationship of the child to the parent. Documents reviewed by agency and included in family data file.

Child's information for determining eligibility (e.g., identity, age, etc.).
Describe:

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Birth certificates/vital records, immunization records, and health records. Documents reviewed by agency and included in family data file.

Letters of employment, self- employment bookkeeping records, work schedules, and paystubs. Independent verification of employment. Agency can either call or send form for employer to complete.

☑ Job training or Educational program. Describe:

Class schedules or progress reports submitted for documentation education. Documents reviewed by agency and included in family data file.

□ Family income. Describe

Pay stubs, child support enforcement records, and profit and loss statements. Documents reviewed by agency and included in family data file.

A parent provides the names of parents and names, gender, and birthdates of the children identified in the family. The number of children is documented by providing at least one of the following documents, as applicable: birth certificates; court orders regarding child custody; adoption documents; records of foster care placements; school or medical records; CWD records; or other reliable documentation indicating the relationship of the child to the parent. Documents are reviewed by agency and included in family data file.

Applicant residence. Describe	
Other. Describe	

Reminder – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start – Child Care Partnerships, or public educational standards which may include pre-k settings

(http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

3.1.8 Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

⊠Time limit for n	naking eligibility d	eterminations.	Describe I	ength of	time
30 days.					

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Track and monitor the eligibility determination process
Other. Describe
None

3.1.9 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE**: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

- a) Identify the TANF agency that established these criteria or definitions:
 - o State/Territory TANF Agency The California Department of Social Services establishes the following criteria or definitions.
- b) Provide the following definitions established by the TANF agency.
 - o "appropriate child care"

Appropriate child care is defined as child care chosen by the parent that meets the needs of the child and parents and is either licensed for the appropriate age group, or special needs category, or is license-exempt and the parents and providers have completed the Health and Safety Self-Certification form and the provider meets TrustLine requirements unless the child care arrangement is exempt from the TrustLine requirements.

"reasonable distance"

Reasonable distance is defined as the distance customarily traveled by working families in accessing child care in the community.

"unsuitability of informal child care"

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Informal child care is unsuitable when the caregiver cannot be Trustlined in accordance with the Trustline regulations or would otherwise be denied payment for child care services that are exempt from licensure because of a violent felony conviction.

o "affordable child care arrangements" Affordable child care is child care where the total cost to the family does not exceed the regional market rate plus family fees established by the state in accordance with the family fee schedule.

nc	lividual penalties associated with the TANF work requirements? In writing Parents who receive TANF benefits are informed about the exception to individual penalties associated with the TANF work requirements in writing through a Notice of Action.
	☐ Verbally
	Other. Describe
	List the citation to this TANF policy: The TANF policy can be found in the California Manual of Policy and Procedures, (MPP) Sections 42-711.11 through 42-721.3.

c) How are parents who receive TANF benefits informed about the exception to

- 3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed \$1,000,000. A check-off on the application is sufficient.
 - ☑ Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed \$1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving copayments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

- 3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:
 - a. Provide definition of "Children with special needs" Education Code Section 8208

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- (k) "Children at risk of abuse, neglect, or exploitation" means children who are so identified in a written referral from a legal, medical, or social service agency, or emergency shelter.
- (I) "Children with exceptional needs" means either of the following:
 - (1) Infants and toddlers under three years of age who have been determined to be eligible for early intervention services pursuant to the California Early Intervention Services Act (Title 14 (commencing with Section 95000) of the Government Code) and its implementing regulations. These children include an infant or toddler with a developmental delay or established risk condition, or who is at high risk of having a substantial developmental disability, as defined in subdivision (a) of Section 95014 of the Government Code. These children shall have active individualized family service plans, shall be receiving early intervention services, and shall be children who require the special attention of adults in a child care setting.
 - (2) Children 3 to 21 years of age, inclusive, who have been determined to be eligible for special education and related services by an individualized education program team according to the special education requirements contained in Part 30 (commencing with Section 56000) of Division 4 of Title 2, and who meet eligibility criteria described in Section 56026 and, Article 2.5 (commencing with Section 56333) of Chapter 4 of Part 30 of Division 4 of Title 2, and Sections 3030 and 3031 of Title 5 of the California Code of Regulations. These children shall have an active individualized education program, shall be receiving early intervention services or appropriate special education and related services, and shall be children who require the special attention of adults in a child care setting. These children include children with intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance (also referred to as emotional disturbance), orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities, who need special education and related services consistent with Section 1401(3)(A) of Title 20 of the United States Code.
- (y) "Severely disabled children" are children with exceptional needs from birth to 21 years of age, inclusive, who require intensive instruction and training in programs serving pupils with the following profound disabilities: autism, blindness, deafness, severe orthopedic impairments, serious emotional disturbances, or severe intellectual disabilities. "Severely disabled children" also include those individuals who would have been eligible for enrollment in a developmental center for handicapped pupils under Chapter 6 (commencing with Section 56800) of Part 30 of Division 4 of Title 2 as it read on January 1, 1980.

Describe how services are prioritized

First priority is given to neglected or abused children who are recipients of child protective services or children who are at risk of being neglected or abused. Services are not prioritized for children with exceptional needs.

- b. Provide definition of "Families with very low incomes" The state of California does not have a definition for families as "families with very low incomes." and describe how services are prioritized Services are prioritized as described in EC 8263.
- c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)
 Families receiving TANF, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are guaranteed subsidy eligibility because they categorically qualify for services.
- 3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children's learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will make it significantly easier for these vulnerable families to access child care services. This language is consistent with current requirements established through CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

Describe the status of the State/Territory's procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

- ☐ Fully implemented and meeting all Federal requirements outlined above. Describe the following:
 - a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements

Most subsidized child care programs administered by the CDE, including those supported by the CCDF, follow the eligibility and need criteria described in *Education Code* Section 8263 (partial citation included below), including homeless children and families.

Education Code Section 8263:

- (a) The Superintendent shall adopt rules and regulations on eligibility, enrollment, and priority of services needed to implement this chapter. In order to be eligible for federal and state subsidized child development services, families shall meet at least one requirement in each of the following areas:
 - (1) A family is (A) a current aid recipient, (B) income eligible, (C) homeless, or (D) one whose children are recipients of protective services, or whose children have been identified as being abused, neglected, or exploited, or at risk of being abused, neglected, or exploited.
 - (2) A family needs the child care services (A) because the child is identified by a legal, medical, or social services agency, or emergency shelter as (i) a recipient of protective services or (ii) being neglected, abused, or exploited, or at risk of neglect, abuse, or exploitation, or (B) because the parents are (i) engaged in vocational training leading directly to a recognized trade, paraprofession, or profession, (ii) employed or seeking employment, (iii) seeking permanent housing for family stability, or (iv) incapacitated.
- (b) Except as provided in Article 15.5 (commencing with Section 8350), priority for federal and state subsidized child development services is as follows:

- (1) (A) First priority shall be given to neglected or abused children who are recipients of child protective services, or children who are at risk of being neglected or abused, upon written referral from a legal, medical, or social services agency. If an agency is unable to enroll a child in the first priority category, the agency shall refer the family to local resource and referral services to locate services for the child.
 - (B) A family who is receiving child care on the basis of being a child at risk of abuse, neglect, or exploitation, as defined in subdivision (k) of Section 8208, is eligible to receive services pursuant to subparagraph (A) for up to three months, unless the family becomes eligible pursuant to subparagraph (C).
 - (C) A family may receive child care services for up to 12 months on the basis of a certification by the county child welfare agency that child care services continue to be necessary or, if the child is receiving child protective services during that period of time, and the family requires child care and remains otherwise eligible. This time limit does not apply if the family's child care referral is recertified by the county child welfare agency.
- (2) Second priority shall be given equally to eligible families, regardless of the number of parents in the home, who are income eligible. Within this priority, families with the lowest gross monthly income in relation to family size, as determined by a schedule adopted by the Superintendent, shall be admitted first. If two or more families are in the same priority in relation to income, the family that has a child with exceptional needs shall be admitted first. If there is no family of the same priority with a child with exceptional needs, the same priority family that has been on the waiting list for the longest time shall be admitted first. For purposes of determining order of admission, the grants of public assistance recipients shall be counted as income.
- b. Procedures to conduct outreach to homeless families to improve access to child care services

CDE and SSPI Goals for improving access for homeless families:

 The CDE and R&R agencies may provide child care information and homeless rights to parents, providers, early learning programs, agencies, local educational agencies, and other

agencies in a user-friendly format. Outreach can be done through poster dissemination, newsletters, and other means of communication.

- The CDE and R&R agencies may provide training to local educational agencies (LEAs) regarding child care policies, procedures, and collaboration with the child care programs in their areas. This may include the LEA homeless liaisons identifying homeless children eligible for child care and providing outreach to child care providers.
- The CDE and R&R agencies may provide resources and training on the definition of homelessness (according to McKinney-Vento), identification, and services to homeless children and their families.
- The CDE will continue the collaboration and coordination between the Early Education and Support Division and the homeless education program within the Department.
- CDE and R&R agencies also support the idea of establishing a McKinney-Vento liaison at each site that can be trained as well as be a point of contact with the LEAs.
- c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

Education Code 8263(e): A physical examination and evaluation, including age appropriate immunization, shall be required before, or within, six weeks of enrollment.

Not implemented. If not implemented, the State/Territory must provide a
State/Territory-specific implementation plan for achieving compliance with
this requirement, including planned activities, necessary legislative or
regulatory steps to complete, and target completion date (no later than
September 30, 2016). Please provide brief text responses and descriptions
only. Do not cut and paste charts or tables here. Your responses will be
consolidated electronically into an Implementation Plan summary report.

• Overall Target Completion Date (no later than September 30, 2016)

 Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

- Implementation progress to date Identify any requirement(s) partially or substantially implemented
- Unmet requirement Identify the requirement(s) not fully implemented
- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - o Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity
 - Partners Who is the responsible agency partnering with to complete implementation of this activity

3.3 Protection for Working Parents

3.3.1 Twelve-Month Eligibility

The CCDBG Act of 2014 establishes a minimum 12-month eligibility and redetermination period for CCDF families. States and Territories are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for a minimum of 12 months before the State/Territory redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) & (ii))

Note that this change means a State/Territory **may not** terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State/Territory **may not** terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

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Describe the status of the State/Territory's establishment of 12-month eligibility and redetermination periods for CCDF families.

Lacking final federal guidance on protection for working parents, it is unclear if California's current law and regulation fully comply with the definition 12-month eligibility included in the reauthorization of CCDBG.

the Lea	plemented and meeting all Federal requirements outlined above. List d Agency's policy citation(s) and describe circumstances considered ary changes in work, education or training that are not subject to ation	
Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.		
•	Overall Target Completion Date (no later than September 30, 2016)	
•	Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)	
	 Implementation progress to date – Identify any requirement(s) partially or substantially implemented 	
	 Unmet requirement - Identify the requirement(s) not fully implemented 	
•	Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)	
0	Projected start date for each activity	
0	Projected end date for each activity	
0	Agency – Who is responsible for complete implementation of this activity	
0	Partners – Who is the responsible agency partnering with to complete implementation of this activity	

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period – the State/Territory may not exercise the option to terminate assistance based on a parent's non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and redetermination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period. Does the State/Territory terminate assistance prior to 12 months due to a parent's non-temporary loss of work or cessation of attendance at a job training or education program?

☑ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs.

In order to receive subsidized child care services administered by the CDE, families must meet the eligibility and need criteria described in *Education Code* Section 8263 (partial citation included below).

(a) The Superintendent shall adopt rules and regulations on eligibility, enrollment, and priority of services needed to implement this chapter. In order to be eligible for federal and state subsidized child development services, families shall meet at least one requirement in each of the following areas:

(1) A family is (A) a current aid recipient, (B) income eligible, (C) homeless, or (D) one whose children are recipients of protective services, or whose children have been identified as being abused, neglected, or exploited, or at risk of being abused, neglected, or exploited.

- (2) A family needs the child care services (A) because the child is identified by a legal, medical, or social services agency, or emergency shelter as (i) a recipient of protective services or (ii) being neglected, abused, or exploited, or at risk of neglect, abuse, or exploitation, or (B) because the parents are (i) engaged in vocational training leading directly to a recognized trade, paraprofession, or profession, (ii) employed or seeking employment, (iii) seeking permanent housing for family stability, or (iv) incapacitated.
- (b) Except as provided in Article 15.5 (commencing with Section 8350), priority for federal and state subsidized child development services is as follows:
 - (1) (A) First priority shall be given to neglected or abused children who are recipients of child protective services, or children who are at risk of being neglected or abused, upon written referral from a legal, medical, or social services agency. If an agency is unable to enroll a child in the first priority category, the agency shall refer the family to local resource and referral services to locate services for the child.
 - (B) A family who is receiving child care on the basis of being a child at risk of abuse, neglect, or exploitation, as defined in subdivision (k) of Section 8208, is eligible to receive services pursuant to subparagraph (A) for up to three months, unless the family becomes eligible pursuant to subparagraph (C).
 - (C) A family may receive child care services for up to 12 months on the basis of a certification by the county child welfare agency that child care services continue to be necessary or, if the child is receiving child protective services during that period of time, and the family requires child care and remains otherwise eligible. This time limit does not apply if the family's child care referral is recertified by the county child welfare agency.
 - (2) Second priority shall be given equally to eligible families, regardless of the number of parents in the home, who are income eligible. Within this priority, families with the lowest gross monthly income in relation to family size, as determined by a schedule adopted by the Superintendent, shall be admitted first. If two or more families are in the same priority in relation to income, the family that has a child with exceptional needs shall be admitted first. If there is no family of the same priority with a child with exceptional needs, the same priority family that has been on the waiting list for the longest time shall be admitted first. For purposes of determining order of admission, the grants of public assistance recipients shall be counted as income.

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5 CCR 18086.5(a) describes the job-search related provisions: "(a) If the basis of need as stated on the application for services is seeking employment, the parent's period of eligibility for child care and development services is limited to 60 working days during the contract period, except as specified in subdivisions (d) and (e). Services shall occur on no more than five days per week and for less than 30 hours per week. The period of eligibility shall start on the day authorized by the contractor and extend for consecutive working days."

Please note: The Child Care and Development Block Grant Section 658E(c)(2)(N)(iii) describes a job-search period of not less than three months. The CDE's definition includes 60 working days which equates to approximately three calendar months.

☐ No, the State/Territory does not allow this option.

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing redetermination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or redetermination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

Lacking final federal guidance on prevention of disruption to work, it is unclear if California's current law and regulation fully comply with the definition of prevention of disruption to work included in the reauthorization of CCDBG.

Fully implemented and meeting all Federal requirements outlined above. List
the Lead Agency's policy citation(s) and describe the policies and procedures
for not unduly disrupting employment

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□ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance wi this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and description only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.		
Overall Target Completion Date (no later than September 30, 2016)		
 Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) 		
 Implementation progress to date – Identify any requirement(s) partially or substantially implemented 		
 Unmet requirement - Identify the requirement(s) not fully implemented 		
 Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) 		
Projected start date for each activity		
Projected end date for each activity		
o Agency – Who is responsible for complete implementation of this activity		
 Partners – Who is the responsible agency partnering with to complete implementation of this activity 		
Contribution to Payment		

3.4 Family C

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note − If the sliding fee scale is not statewide, check here . Describe how many jurisdictions set their own sliding fee scale

Fill in the chart based on the most populous area of the State.

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Minimum "Entry" Income Level	What is the monthly copayment for a family of this size upon initial entry into CCDF?		Maximum "Entry" Income Level	What is the monthly copayment for a family of this size upon initial entry into CCDF?	What is the percent of income for (e)?
1	\$1,820.00	\$42 Full-time fee	2.31%	\$3,283.00	\$326.00	9.93%
2	\$1,820.00	\$42 Full-time fee	2.31%	\$3,283.00	\$326.00	9.93%
3	\$1,950.00	\$42 Full-time fee	2.15%	\$3,518.00	\$345.00	9.81%
4	\$2,167.00	\$42 Full-time fee	1.94%	\$3,908.00	\$373.00	9.54%
5	\$2,513.00	\$42 Full-time fee	1.67%	\$4,534.00	\$373.00	8.23%

- a) What is the effective date of the sliding fee scale(s)? July 1, 2014
- b) Provide the link to the sliding fee scale http://www.cde.ca.gov/sp/cd/ci/familyfeeschedjuly2014.asp

3.4.2 How will the family's contribution be calculated and to whom will it be applied? Check		
all that apply.		
🔀 Fee is a dollar amount and		
Fee is per child with the same fee for each child		
Fee is per child and discounted fee for two or more children		
Fee is per child up to a maximum per family		
No additional fee charged after certain number of children		
igotimes Fee is per family		
Fee is a percent of income and		
Fee is a percent of income and Fee is per child with the same percentage applied for each child		
Fee is per child and discounted percentage applied for two or more		
children		
Fee is per child up to a maximum per family		
No additional percentage applied charged after certain number of		
children children		
Fee is per family		
Contribution schedule varies because it is set locally/regionally (as		
indicated in 1.2.1). Describe		
Other. Describe		
3.4.3 Will the Lead Agency use other factors in addition to income and family size to		

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Yes, and describe those additional factors using the checkboxes below.

determine each family's copayment? (658E(c)(3)(B))

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 Number of hours the child is in care Lower copayments for higher quality of care as defined by the State/Territory ✓ Other. Describe other factors Part-time or full-time care. 		
☐ No.		
3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.42(c)). Will the Lead Agency waive family contributions/co-payments for families whose incomes are at or below the poverty level?		
Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is \$ N/A		
☐ No, the Lead Agency does not waive family contributions/co-payments.		
4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable and not a barrier to families receiving CCDF? Check all that apply.		
Limits the maximum co-payment per family. Describe		
Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit and describe		
☐ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe		
Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying. Describe		
Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider.		
No Additional Payments or Costs/Exceptions (<i>EC</i> 8273.3 and 5 <i>CCR</i> 18111) Except as provided below, neither a contractor nor a provider of services shall require or solicit, in cash or in kind, additional payments from the recipients of service. The prohibition includes activities or services that would increase the family's cost of participation including meals and recreation.		

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Education Code Section 8273.3.

- (a) The family fee schedule shall provide, among other things, that a contractor or provider may require parents to provide diapers. A contractor or provider offering field trips either may include the cost of the field trips within the service rate charged to the parent or may charge parents an additional fee. Federal or state money shall not be used to reimburse parents for the costs of field trips if those costs are charged as an additional fee. A contractor or provider that charges parents an additional fee for field trips shall inform parents, before enrolling the child, that a fee may be charged and that no reimbursement will be available.
- (b) A contractor or provider may require parents to provide diapers or charge parents for field trips, subject to all of the following conditions:
 - (1) The contractor or provider has a written policy adopted by the agency's governing board that includes parents in the decision-making process regarding both of the following:
 - (A) Whether or not, and how much, to charge for field trip expenses.
 - (B) Whether or not to require parents to provide diapers.
 - (2) The contractor or provider does not charge fees in excess of twenty-five dollars (\$25) per child in a contract year.
 - (3) The contractor or provider does not deny participation in a field trip due to a parent's inability or refusal to pay the fee.
 - (4) The contractor or provider does not take adverse action against a parent for the parent's inability or refusal to pay the fee.
- (c) A contractor or provider shall establish a payment system that prevents the identification of children based on whether or not a child's family has paid field trip fees.
- (d) The contractor or provider shall report expenses incurred and income received for field trips to the department. Income received shall be reported as restricted income.

Other. Describe:

Families are charged a flat monthly fee based on the families income, family size, and certified need.

4 Ensure Equal Access to High Quality Child Care for Low-Income Children

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The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory's payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

- 4.1 Parental Choice In Relation to Certificates, Grants or Contracts

 The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.
 - 4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

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The state has several ways to ensure parents are informed about the full array of child care options. When a parent calls or visits an R&R agency seeking information about child care choices, he/she is counseled about how to select the most appropriate care to meet the family's needs. At that time, he/she is given a list of several child care providers of the types and in the locations (whether near home, work, or place of training) in which he/she has indicated an interest. The APPs also offer and explain the full array of child care setting options to parents who are eligible for child care subsidy and assist them with finding the appropriate care to meet their needs.

4.1.2 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

The state has several ways to ensure parents are informed about the full array of child care options. When a parent calls or visits an R&R agency seeking information about child care choices, he/she is counseled about how to select the most appropriate care to meet the family's needs. At that time, he/she is given a list of several child care providers of the types and in the locations (whether near home, work, or place of training) in which he/she has indicated an interest. The APPs also offer and explain the full array of child care setting options to parents who are eligible for child care subsidy and assist them with finding the appropriate care to meet their needs.

4.1.3	Describe how the parent is informed of the option to choose from a variety of child care categories – such as private, not-for-profit, faith-based providers (if using a certificate), centers, family child care homes, or in-home providers. (658E(c)(2)(A)(i), 658P(2), 658Q)) Check all that apply.
	$\hfill\Box$ Certificate form provides information about the choice of providers, including high quality providers
	oxtimes Certificate is not linked to a specific provider so parents can choose provider of choice
	⊠ Consumer education materials on choosing child care
	☑ Referral to child care resource and referral agencies
	⊠ Co-located resource and referral in eligibility offices
	oxtimes Verbal communication at the time of application
	⊠Community outreach, workshops or other in-person activities
	☐ Other. Describe

4.1.4 Child Care Services Available through Grants or Contracts

- a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1)) Note: Do not check "yes" if every provider is simply required to sign an agreement in order to be paid in the certificate program.
 - ✓ Yes. If yes, describe:
 - The type(s) of child care services available through grants or contracts
 - Consistent with statutory requirement, each fiscal year the budget identifies the amount of funding available for distribution in each program (for a summary of Child Care and Development programs, see http://www.cde.ca.gov/sp/cd/op/cdprograms.asp)
 - The entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.) Alternative Payment Programs (APP) and Direct Service receive contracts for services. Resource and Referral (R&R) agencies are supported through contracts. Local Child Care and Development Planning Councils provide allocation needs for each of the counties.
 - O The process for accessing grants or contracts
 When there is new funding available, the CDE initiates the
 Request for Application (RFA) process and the availability of
 funding is announced. The RFA for an award of new funding for
 child care and development services or expansion of existing level
 of services, is posted on the Funding Web page at
 http://www.cde.ca.gov/fg/fo.
 - The CDE also provides training and technical assistance for applicants via webinar and other formats.
 - o The range of providers available through grants or contracts The range of providers depends on the type of contract. For Alternative Payment/Voucher Contracts, parents may choose the following provider types: license-exempt (Family, Friend, or Neighbor Care), Family Child Care Home, or Center-Based Child Care. For Direct Service contracts, services are provided in centers and family child care settings.
 - How rates for contracted slots are set through grants and contracts
 - For Alternative Payment/Voucher Contracts, providers are reimbursed according to the Regional Market Rate. For Direct Service Contracts, contractors are reimbursed according to the

Standard Reimbursement Rate. These rates are established in the annual state budget process.

How the State/Territory determines which entities to contract with for increasing supply and/or improving quality
Applications are scored based on the criteria in the RFA which can vary depending on the type of program and funding available.
Funding is awarded based upon the number of applications received, the scoring of the applications, and available resources.

		received, the scoring of the applications, and available resources.
	0	If contracts are offered statewide and/or locally The CDE has contracts to provide child care services with local entities statewide, which may include Local Educational Agencies (LEAs).
	☐ No	. If no, skip to 4.1.4.
b)		ad Agency use grants or contracts for child care services to achieve following (check all that apply):
	⊠ Inci	rease the supply of specific types of care with grants or contracts: Programs to serve children with disabilities Programs to serve infants and toddlers Programs to serve school-age children Programs to serve children needing non-traditional hour care Programs to serve homeless children Programs to serve children in underserved areas Programs that serve children with diverse linguistic or cultural backgrounds Programs that serve specific geographic areas Urban Rural Other. Describe
	⊠ Imp for	rove the quality of child care programs with grants or contracts: □ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs □ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards □ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased

education requirements to higher compensation Programs to serve children with disabilities or special needs

Programs to serve infants and toddlers

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 ☑ Programs to serve school-age children ☑ Programs to serve children needing non-traditional hour care ☑ Programs to serve homeless children ☑ Programs to serve children in underserved areas ☑ Programs that serve children with diverse linguistic or cultural backgrounds ☑ Programs that serve specific geographic areas ☑ Urban ☑ Rural ☑ Other. Describe
4.1.5 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access
Licensing requirements require providers to inform parents that they have unlimited access to children in care. Written materials given to parents and providers at redetermination contain the same information CDE monitors to ensure that the requirement is met. The EESD field services consultants ensure agencies are providing this service as part of the monitoring and review process. The agencies include this information in both the parent and provider files.
4.1.6 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. Will the Lead Agency limit the use of in-home care in any way?
Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply. Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act. Describe
A contractor may develop a policy for in-home license exempt care requiring a minimum number of children to ensure the provider receives a payment equivalent to the minimum wage.
Restricted based on provider meeting a minimum age requirement. Describe A contractor may develop a policy for in-home license exempt care requiring a minimum number of children to ensure the provider receives a payment equivalent to the minimum wage.
Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe

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	Restricted to care by relatives. Describe
	Restricted to care for children with special needs or medical condition Describe
	Restricted to in-home providers that meet some basic health and safety requirements. Describe
	Other. Describe Any individual other than a grandparent, aunt, or uncle, providing care must be checked with TrustLine registry.
□No	

4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval.

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Internet in an easily interpretable and understandable form.

The State/Territory must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the law requires States and Territories to take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it

takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative
Methodology. Did the State/Territory conduct a statistically and valid and reliable
MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?
⊠MRS
☐ Alternative Methodology. Describe
☐Both. Describe
☐Other. Describe

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other stateor state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The Market Rate Survey (MRS) methodology currently being used was approved by the California State Legislature in 2004, and has been the only authorized methodology used in the 2005, 2007, 2009, 2012 and 2014 MRS. Prior to each MRS the local child care R&R agencies are notified that the MRS will soon commence. The R&R's notify and encourage their providers to participate in the MRS.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

The 2014 MRS was completed using the same California Legislature approved methodology that has been utilized since the 2005 iteration. In general, the 2014 Market Rate Survey's methodological approach can be summarized as follows:

- 1. Definition of the Population: The 2014 MRS defined the survey
- Populations as all Licensed Child Care Centers (LLCs) and Licensed Family Child Care Homes (LCFHs), including those that contracted directly with the CDE (as many of these serve families who pay the full market rate without subsidies). LCCs and LFCHs that only served subsidized children were excluded from the survey population.
- 3. Sample Frame Development: A list, or "frame", is created of the population universe using both the Resource & Referral (R&R) lists of child care providers and the State's Community Care Licensing Database (CCL).

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In creating the frame, individual providers who appeared on either list were included – and duplicate listings were removed.

4. Market Profile Approach for Sampling and Estimating: "Market Profiles" are groupings of ZIP Codes with similar socioeconomic characteristics (i.e., similar housing costs, population density, employment rates, and so forth); the ZIP Code groupings are determined by statistical analysis of Census data.

The 2014 MRS used the same sampling and analysis methods developed, for and utilized in previous survey iterations, including, calculating reimbursement ceilings at a Market Profile level for the following:

- a. Type of Care Licensed Child Care Center, Licensed Family Care Home, and License Exempt Providers.
- Age of Child Infant (under two years of age), preschooler (between the ages of two through five), and school – age (age six and older).
- c. Time Categories Hourly, daily, part time weekly, full time weekly, part time monthly, and full time monthly.

County and sub – county estimates become the weighted averages of the Market Profiles within their jurisdictions. This approach is based on statistical practices for small areas that may not have a sufficient number of responding providers.

- 5. Mixed Mode Date Collection Strategy: A multi-contact approach is used to collect the data, using both mail and telephone modes. The 2014 MRS included a web survey option.
- 4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:
 - a) Geographic area (e.g., statewide or local markets)
 All 58 counties of the State of California were included in the MRS sampling frame.

b) Type of provider

All LCCs and LFCHs including those that contracted directly with the CDE. LCCs and LFCHs that only served subsidized children were excluded from the survey population.

c) Age of child

Infant (under two years of age), preschooler (between the ages of two through five), and school – age (age six and older).

d) Describe any other key variations examined by the market rate survey, such as quality level

- 4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.
 - a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)
 2014 MRS was completed by November 2014.
 - b) Date report containing results was made widely available, no later than 30 days after the completion of the report
 The California State Legislature has not approved the use of the 2014 MRS ceilings.
 - c) How the report containing results was made widely available and provide the link where the report is posted if available

The most recent MRS was completed November 2014. This completed survey has not been approved by the California Legislature for implementation. Senate Bill 97 (Chapter 11 of the Statutes of 2015), which was signed into law on June 24, 2015, maintains the current Regional Market Rate ceilings through September 30, 2015. The current ceilings are set at the 85th percentile of the 2009 Regional Market Rate Survey reduced by 10.11 percent or the 85th percentile of the 2005 Regional Market Rate Survey whichever is greater. The licensed – exempt child care provider ceilings are currently set at 60 percent of the Family Child Care Home ceilings. Beginning October 1, 2015, per the Budget Act of 2015, the California Department of Education increased the Regional Market Rate ceilings calculated above by 4.5 percent. The license-exempt child care provider ceilings increased to 65 percent of the new Family Child Care Home ceilings.

4.3 Setting Payment Rates

- 4.3.1 Provide the base payment rates and percentiles (based on current MRS) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note If the payment rates are not set by the State/Territory, check here ... Describe how many jurisdictions set their own payment rates
 - a) Infant (6 months), full-time licensed center care in most populous geographic region
 - Rate \$1,683.44 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
 - b) Infant (6 months), full-time licensed FCC care in most populous geographic region
 - Rate \$1,014.48 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)

- c) Toddler (18 months), full-time licensed center care in most populous geographic region
 - Rate \$1,683.44 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
- d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
 - Rate \$1,014.48 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
- e) Preschooler (4 years), full-time licensed center care in most populous geographic region
 - Rate \$1,189.69 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
- f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
 - Rate \$968.21 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
 - Rate \$875.20 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
- h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
 - Rate \$770.12 per Full time Monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 85th (as described in 4.2.5)
- i) Describe the calculation/definition of full-time care
 - a. Full-time weekly, which shall only be used when a certified need for child care is more than 30 hours per week.
 - b. Full-time monthly, which shall only be used for the following:
 - i. A certified need for child care of 30 hours or more per week and that need occurs in every week of the month; or
 - ii. A certified need for child care averages 30 hours or more per week when calculated by dividing the total number of hours of need in

the month by 4.33, and that need occurs in every week of the month.

- j) Provide the effective date of the payment rates The ceilings in this document reflect the 2014 survey. These ceilings have not been approved by the California State Legislature.
- k) Provide the link to the payment rates Since these ceilings have not been approved by the California State Legislature there is no Web link available.
- 4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☐ Tiered rate/rate add-on for non-traditional hours. Describe:

The 5 CCR Section 18075.1 provides an adjustment factor for licensed providers not utilizing the hourly ceiling.

- (b) When a licensed provider is meeting the certified need for child care that includes hours during the period from 6:00 p.m. to 6:00 a.m. on any day of the week or from 6 a.m. Saturday to 6:00 a.m. Monday, the contractor shall multiply the regional market rate ceiling for the applicable rate category by the appropriate adjustment factor as follows:
 - (1) By 1.25 when 50 percent or more of the certified need for child care occurs during this period.
 - (2) By 1.125 when at least ten percent, but less than 50 percent of the certified need for child care occurs during this period.

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□ Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe	
The 5 CCR Section 18075.2 provides an adjustment for children who are defined as those with exceptional needs (1.2) as well as for children who are defined as severely disabled (1.5).	·e
☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe	
☐ Tiered rate/rate add-on for programs meeting higher quality as defined by t State/Territory. Describe	the
☐ Tiered rate/rate add-on for programs serving homeless children. Describe	
☐ Other tiered rate/rate add-on beyond the base rate. Describe	
□ None.	

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology

California Assembly Bill 1476 (Chapter 663 of the Statutes of 2014), beginning January 1, 2015 required the CDE to implement ceilings at the 85th percentile of the 2009 Regional Market Rate Survey reduced by 10.11 percent. If calculated ceiling was less than the ceiling provided before January 1, 2015, then the ceiling from the 2005 Regional Market Survey was used. Senate Bill 97 (Chapter 11 of the Statutes of 2015), which was signed into law on June 24, 2015, maintained the previous Regional Market Rate ceilings through September 30, 2015. Beginning October 1, 2015, per the Budget Act of 2015 the California Department of Education increased the Regional Market Rate ceilings by 4.5 percent.

As required by the CCDBG, the CDE conducts a Regional Market Rate Survey every two years. The CDE has the 2014 results on file.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

The Legislature and Governor determine changes to reimbursement rates through the annual state budget process. In the Budget Act of 2014, a new grant opportunity was created. Senate Bill 858 (Chapter 32, Statutes of 2014) authorizes \$50 million of Proposition 98 funds for Quality Rating and Improvement System (QRIS) Block Grant for the support of local early learning QRIS that increase the number of low-income children in high-quality state preschool programs that prepare those children for success in school and life. Recipients of the CSPP QRIS Block Grant may use their funds to support tiered payment and other quality incentives.

California Education Code Section 8203.1 (b)(1) states:

For purposes of this section, "early learning quality rating and improvement system" or "QRIS" is defined as a locally determined system for continuous quality improvement based on a tiered rating structure with progressively higher quality standards for each tier that provides supports and incentives for programs, teachers, and administrators to reach higher levels of quality, monitors and evaluates the impacts on child outcomes, and disseminates information to parents and the public about program quality.

The Budget Act of 2015 also included one-time funds totaling \$24.163 million dollars for QRIS consortia to provide training, technical assistance, and resources to help infant and toddler child care providers meet a higher tier of quality as determined by their local QRIS matrix. No more the 20 percent of the funding awarded to a consortia may be allocated directly to child care providers. Each county participating in a QRIS consortia and in good standing with the CDE shall receive a minimum grant amount of \$25,000 for this purpose, with remaining funds distributed to consortia based on their proportion of contracts with CDE for infant and toddler child care and development. Notwithstanding any other provision of law, the funds appropriated in this schedule shall be available for encumbrance until June 30, 2017.

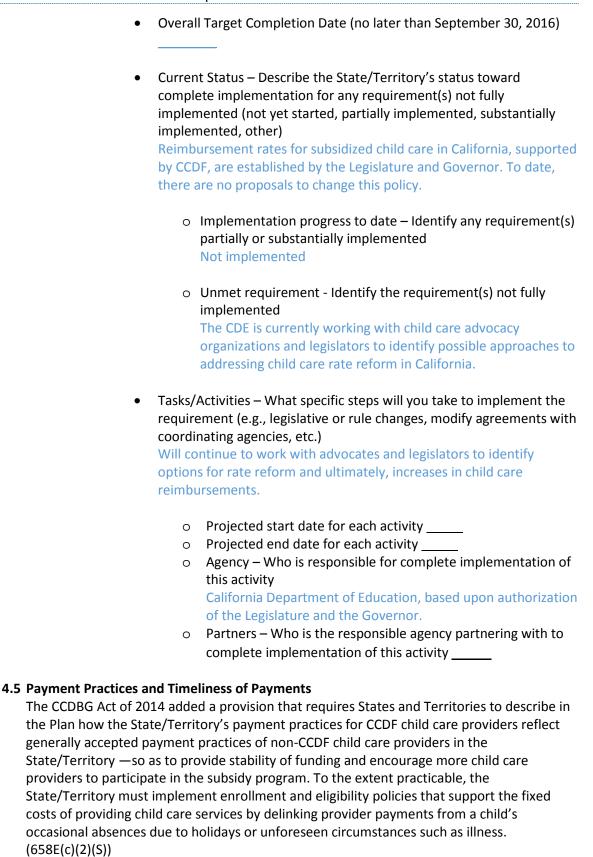
4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1	What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access – such as percentile that rates cover or
	proportion of costs covered)? Check all that apply and describe.
	□ Payment rates are set at the 75th percentile or higher of the most recent survey. Describe

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$\hfill\Box$ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.
☐ Rates based on data on the cost to the provider of providing care meeting certain standards. Describe
☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe
 Data on the proportion of children receiving subsidy being served by high-quality providers. Describe
 Data on where children are being served showing access to the full range of providers. Describe
\square Feedback from parents, including parent survey or parent complaints. Describe
☑ Other. Describe The State of California invests billions of dollars beyond the funding appropriated under the CCDF. Eligibility for most subsidized child care programs in California is based on both eligibility (current aid recipient, income eligible, homeless, or identification of being abused, neglected or exploited, or at risk of being abused, neglected or exploited) and need (recipient of protective services, neglected, abused or exploited, or at risk of neglect, abuse or exploitation, or, because the parents are engaged in vocation training, employed or seeking employment, seeking permanent housing or incapacitated). Parents in voucher/certificate programs may select from center-based, family child care or family, friend and neighbor setting types. These eligibility and need criteria are the current methods used by the State of California to determine access.
4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?
 ☐ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access ☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.



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4.5.1 Describe the status of State/Territory's payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory.

Lacking final federal guidance on Payment Practices and Timeliness of Payments, it is unclear if California's current law and regulation comply with the definition of Payment Practices and Timeliness of Payments included in the reauthorization of CCDBG.

		ated and meeting all Federal requirements outlined above. 4.5.2 through 4.5.3 below.
	State/Territory this requireme regulatory step September 30, only. Do not cu	red. If not implemented, the State/Territory must provide a respecific implementation plan for achieving compliance with ent, including planned activities, necessary legislative or to complete, and target completion date (no later than 2016). Please provide brief text responses and descriptions at and paste charts or tables here. Your responses will be lectronically into an Implementation Plan summary report.
	• Overal 2016)_	l Target Completion Date (no later than September 30,
	comple impler	at Status – Describe the State/Territory's status toward ete implementation for any requirement(s) not fully nented (not yet started, partially implemented, substantially nented, other)
	0	Implementation progress to date – Identify any requirement(s) partially or substantially implemented
	0	Unmet requirement - Identify the requirement(s) not fully implemented
		Activities – What specific steps will you take to implement the ement (e.g., legislative or rule changes, modify agreements with nating agencies, etc.)
	0	Projected start date for each activity
	0	Projected end date for each activity
	0	Agency – Who is responsible for complete implementation of this activity
	0	Partners – Who is the responsible agency partnering with to complete implementation of this activity

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4.5.2	childre the Sta	ne how the payment practices to child care providers who serve CCDF-assisted in reflect generally accepted payment practices of other child care providers in te/Territory to ensure stability of funding to encourage more child care ers to serve children who receive CCDF assistance. The Lead Agency
		Pays prospectively prior to the delivery of services. Describe
		Pays within no more than 21 days of billing for services. Describe
		Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory's definition of occasional absences Broadly consistent with the certified need. (Management Bulletin 14-04) http://www.cde.ca.gov/sp/cd/ci/mb1404.asp
		Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe
		Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and describe
		Pays on a full-time or part-time basis (rather than smaller increments such as hourly)
		Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.) Not to exceed the RMR, 5 CCR 18013 (o) "Maximum reimbursable amount: means the total dollar amount of a contract. Reimbursement from the State shall not exceed the maximum reimbursable amount. The initial maximum reimbursable amount shall be the approved original version of the annual contract based on the Budget Act as signed by the Governor."
		Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment
		Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe
		Other. Describe

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he strategies the State/Territory will use to ensure the timeliness
gth of time for making payments. Describe length of time
onitor the payment process
onic tools (e.g., automated billing, direct deposit, etc.) Describe
gement Bulletin 12-18 was issued to contractors addressing ent to providers, http://www.cde.ca.gov/sp/cd/ci/mb1218.asp , 5 18226 plan for provider payments.
to Meet the Needs of Certain Populations
ded a provision that the State/Territory will develop and crease the supply and improve the quality of child care services d areas, infants and toddlers, children with disabilities, and during non-traditional hours. (658 E(c)(2)(M))
ory conducted data analysis of existing and growing supply needs?
e data sources Section 8499.5.

- (a) The department shall allocate child care funding pursuant to Chapter 2 (commencing with Section 8200) based on the amount of state and federal funding that is available.
- (b) By May 30 of each year, upon approval by the county board of supervisors and the county superintendent of schools, a local planning council shall submit to the department the local priorities it has identified that reflect all child care needs in the county. To accomplish this, a local planning council shall do all of the following:
 - (1) Conduct an assessment of child care needs in the county no less frequently than once every five years. The department shall define and prescribe data elements to be included in the needs assessment and shall specify the format for the data reporting. The needs assessment shall also include all factors deemed appropriate by the local planning council in order to obtain an accurate picture of the comprehensive child care needs in the county. The factors include, but are not limited to, all of the following:
 - (A) The needs of families eligible for subsidized child care.

- (B) The needs of families not eligible for subsidized child care.
- (C) The waiting lists for programs funded by the department and the State Department of Social Services.
- (D) The need for child care for children determined by the child protective services agency to be neglected, abused, or exploited, or at risk of being neglected, abused, or exploited.
- (E) The number of children in families receiving public assistance, including CalFresh benefits, housing support, and Medi-Cal, and assistance from the Healthy Families Program and the Temporary Assistance for Needy Families (TANF) program.
- (F) Family income among families with preschool or schoolage children.
- (G) The number of children in migrant agricultural families who move from place to place for work or who are currently dependent for their income on agricultural employment in accordance with subdivision (a) of, and paragraphs (1) and (2) of subdivision (b) of, Section 8231.
- (H) The number of children who have been determined by a regional center to require services pursuant to an individualized family service plan, or by a local educational agency to require services pursuant to an individualized education program or an individualized family service plan.
- (I) The number of children in the county by primary language spoken pursuant to the department's language survey.
- (J) Special needs based on geographic considerations, including rural areas.
- (K) The number of children needing child care services by age cohort.
- (2) Document information gathered during the needs assessment which shall include, but need not be limited to, data on supply, demand, cost, and market rates for each category of child care in the county.
- (3) Encourage public input in the development of the priorities.

 Opportunities for public input shall include at least one public

hearing during which members of the public can comment on the proposed priorities.

- (4) Prepare a comprehensive countywide child care plan designed to mobilize public and private resources to address identified needs.
- (5) Conduct a periodic review of child care programs funded by the department and the State Department of Social Services to determine if identified priorities are being met.
- (6) Collaborate with subsidized and nonsubsidized child care providers, county welfare departments, human service agencies, regional centers, job training programs, employers, integrated child and family service councils, local and state children and families commissions, parent organizations, early start family resource centers, family empowerment centers on disability, local child care resource and referral programs, and other interested parties to foster partnerships designed to meet local child care needs.
- (7) Design a system to consolidate local child care waiting lists, if a centralized eligibility list is not already in existence.
- (8) Coordinate part-day programs, including state preschool and Head Start, with other child care and development services to provide full-day child care.
- (9) Submit the results of the needs assessment and the local priorities identified by the local planning council to the board of supervisors and the county superintendent of schools for approval before submitting them to the department.
- (10) Identify at least one, but not more than two, members to serve as part of the department team that reviews and scores proposals for the provision of services funded through contracts with the department. Local planning council representatives may not review and score proposals from the geographic area covered by their own local planning council. The department shall notify each local planning council whenever this opportunity is available.
- (c) The department shall, in conjunction with the State Department of Social Services and all appropriate statewide agencies and associations, develop guidelines for use by local planning councils to assist them in conducting needs assessments that are reliable and accurate. The guidelines shall include acceptable sources of demographic and child

care data, and methodologies for assessing child care supply and demand.

(d) Except as otherwise required by subdivision (c) of Section 8236, the department shall allocate funding within each county in accordance with the priorities identified by the local planning council of that county and submitted to the department pursuant to this section, unless the priorities do not meet the requirements of state or federal law. ☐ No. If no, how does the State/Territory determine most critical supply needs? 4.6.2 Describe what method(s) is used to increase supply and improve quality for: a) Infants and toddlers \boxtimes Grants and contracts (as discussed in 4.1.3) □ Family child care networks Start-up funding

■ Start-up funding ⊠ Technical assistance support ⊠ Recruitment of providers ☐ Tiered payment rates (as discussed in 4.4.1) ⊠Other. Describe The 2015 State budget appropriated funding to increase the availability of slots and to provide early intervention services to infants and toddlers younger than three years of age. b) Children with disabilities ☑ Grants and contracts (as discussed in 4.1.3) □ Family child care networks **⊠**Start-up funding ⊠Technical assistance support ⊠ Recruitment of providers □ Tiered payment rates (as discussed in 4.4.1) ⊠Other. Describe c) The 2015 State budget appropriated \$12.1 million for an additional 2,500 part-day California State Preschool slots with priority to be given to children with exceptional needs. Children who receive care during non-traditional hours ☑ Grants and contracts (as discussed in 4.1.3) □ Family child care networks **Start-up funding** ⊠ Technical assistance support ⊠ Recruitment of providers ☑Tiered payment rates (as discussed in 4.4.1) ☐ Other. Describe

d)	Homeless children
	☐ Grants and contracts (as discussed in 4.1.3)
	□ Family child care networks
	Start-up funding
	□ Technical assistance support
	⊠ Recruitment of providers
	☐ Tiered payment rates (as discussed in 4.4.1)
	☐ Other. Describe

- 4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q)) Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.
 - ☐ Fully implemented and meeting all Federal requirements outlined above.

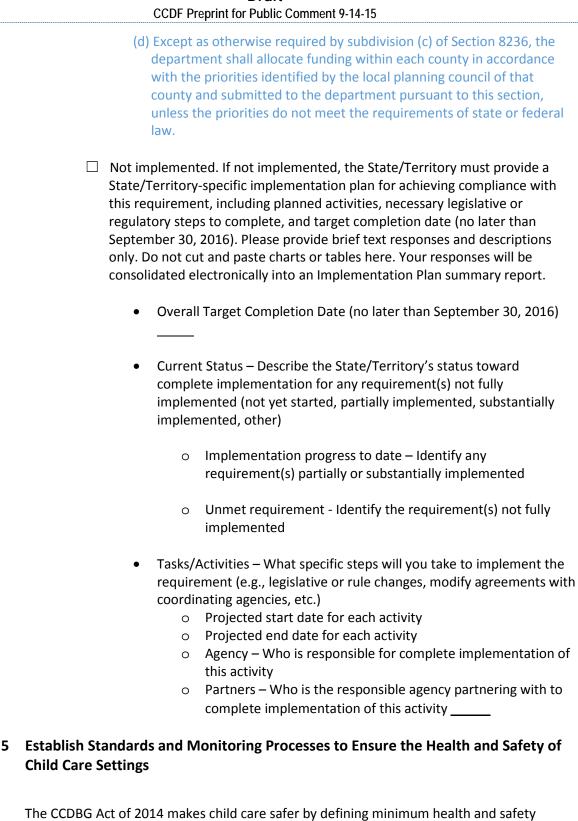
 Describe

EC Section 8499.5 describes the responsibilities of Local Planning Councils to establish local priorities for the child care needs of the county.

- (a) The department shall allocate child care funding pursuant to Chapter 2 (commencing with Section 8200) based on the amount of state and federal funding that is available.
- (b) By May 30 of each year, upon approval by the county board of supervisors and the county superintendent of schools, a local planning council shall submit to the department the local priorities it has identified that reflect all child care needs in the county. To accomplish this, a local planning council shall do all of the following:
 - (1) Conduct an assessment of child care needs in the county no less frequently than once every five years. The department shall define and prescribe data elements to be included in the needs assessment and shall specify the format for the data reporting. The needs assessment shall also include all factors deemed appropriate by the local planning council in order to obtain an accurate picture of the comprehensive child care needs in the county. The factors include, but are not limited to, all of the following:
 - (A) The needs of families eligible for subsidized child care.
 - (B) The needs of families not eligible for subsidized child care.

- (C) The waiting lists for programs funded by the department and the State Department of Social Services.
- (D) The need for child care for children determined by the child protective services agency to be neglected, abused, or exploited, or at risk of being neglected, abused, or exploited.
- (E) The number of children in families receiving public assistance, including CalFresh benefits, housing support, and Medi-Cal, and assistance from the Healthy Families Program and the Temporary Assistance for Needy Families (TANF) program.
- (F) Family income among families with preschool or schoolage children.
- (G) The number of children in migrant agricultural families who move from place to place for work or who are currently dependent for their income on agricultural employment in accordance with subdivision (a) of, and paragraphs (1) and (2) of subdivision (b) of, Section 8231.
- (H) The number of children who have been determined by a regional center to require services pursuant to an individualized family service plan, or by a local educational agency to require services pursuant to an individualized education program or an individualized family service plan.
- (I) The number of children in the county by primary language spoken pursuant to the department's language survey.
- (J) Special needs based on geographic considerations, including rural areas.
- (K) The number of children needing child care services by age cohort.
- (2) Document information gathered during the needs assessment which shall include, but need not be limited to, data on supply, demand, cost, and market rates for each category of child care in the county.
- (3) Encourage public input in the development of the priorities. Opportunities for public input shall include at least one public hearing during which members of the public can comment on the proposed priorities.

- (4) Prepare a comprehensive countywide child care plan designed to mobilize public and private resources to address identified needs.
- (5) Conduct a periodic review of child care programs funded by the department and the State Department of Social Services to determine if identified priorities are being met.
- (6) Collaborate with subsidized and nonsubsidized child care providers, county welfare departments, human service agencies, regional centers, job training programs, employers, integrated child and family service councils, local and state children and families commissions, parent organizations, early start family resource centers, family empowerment centers on disability, local child care resource and referral programs, and other interested parties to foster partnerships designed to meet local child care needs.
- (7) Design a system to consolidate local child care waiting lists, if a centralized eligibility list is not already in existence.
- (8) Coordinate part-day programs, including state preschool and Head Start, with other child care and development services to provide full-day child care.
- (9) Submit the results of the needs assessment and the local priorities identified by the local planning council to the board of supervisors and the county superintendent of schools for approval before submitting them to the department.
- (10) Identify at least one, but not more than two, members to serve as part of the department team that reviews and scores proposals for the provision of services funded through contracts with the department. Local planning council representatives may not review and score proposals from the geographic area covered by their own local planning council. The department shall notify each local planning council whenever this opportunity is available.
- (c) The department shall, in conjunction with the State Department of Social Services and all appropriate statewide agencies and associations, develop guidelines for use by local planning councils to assist them in conducting needs assessments that are reliable and accurate. The guidelines shall include acceptable sources of demographic and child care data, and methodologies for assessing child care supply and demand.



The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and

Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don't care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(F) Nothing in the statute prohibits the State/Territory from exempting child care providers from licensing requirements. But, if the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the health, safety, and development of children receiving CCDF who are cared for by the license-exempt providers. (658E(c)(2)(F)(ii))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to all child care services provided within the State. (658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

Child Care Center means any child care facility of any capacity, other than a family child care home, in which less than 24-hour per day non-medical care and supervision are provided to children in a group setting.

- Infant Center means any child care center or part of a child care center of any capacity where less than 24 hour per day nonmedical care and supervision are provided to infants, who are children under two years of age, in a group setting
 - Toddler Component means the component of a preschool or infant care program designed for children between the ages of 18 months and 30 months.
- Preschool Center means any child care center or part of a child care center
 of any capacity where less than 24-hour per day nonmedical care and
 supervision are provided to children over the age of two years and who are

not School-Age, in a group setting.

- Toddler Component means the component of a preschool or infant care program designed for children between the ages of 18 months and 30 months.
- School-Age Center means any child care center or part of a child care center of any capacity where less than 24-hour per day nonmedical care and supervision is provided to school-age children in a group setting.
 - O School-Age means any child who one of the following:
 - Has entered the first grade or above;
 - Is in a child care program providing care and supervision exclusively to children enrolled in kindergarten and above
- Child Care Center for Mildly III means any child care center or part of a child care center of any capacity where less than 24-hour per day nonmedical are provided to mildly ill children in a group setting.
- Family Child Care Homes (FCCHs) means regularly provided care, protection and supervision of children, in the caregiver's own home, for periods of less than 24 hours per day, while the parents or authorized representatives are away.
 - Small FCCH means a home that provides family child care for up to six children, or for up to 8 children if at least 2 children are school age.
 - Large FCCH means a home that provides family child care for up to 12 children, or for up to 14 children if at least 2 children are school age.

NOTE: The above capacities, for both Small and Large FCCHs, include children under age 10 who live in the licensee's home

- 5.1.2 Does your State/Territory exempt any child care providers that can receive CCDF from its licensing requirements?
 - Yes. Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

License-exempt child care is a child care program that can legally operate without a license, and licensing standards do not apply to them. Types of providers who are license-exempt include:

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- Relatives of a child/children being cared for (i.e., spouses, parents, adult siblings, aunts, uncles, first cousins, step-relatives and grandparents)
- Any arrangement providing care for children of only one family in addition to the operator's own children.
- Cooperative arrangements (Co-Ops) between parents as defined by Health and Safety Code Section 1597.792(e)
- Public/private schools
- Before and after school programs/extended day care programs operated by public/private schools.
- Recreation programs operated by Boy and Girl Scouts, Boys and Girls Club, YMCA, Camp Fire USA and similar organizations
- Public recreation programs as defined by Health and Safety Code Section 1597.792(g)
- Organized Camps as defined in Health and Safety Code Section 18897.

The State does not conduct on-site visits for license-exempt providers. However, license-exempt providers are investigated by Child Protective Services if there is any report of abuse, neglect or any situation that affects the safety of the child. As a result of these investigations, license-exempt providers may no longer qualify for reimbursement for care provided and funding would cease. License-exempt in home providers who are not a grandparent, aunt, or uncle of the child are required to have TrustLine fingerprinting. TrustLine fingerprinting includes: state criminal background checks, FBI criminal background checks, and the child abuse and sex offender registries. If a felony is committed by an individual actively providing care as a license-exempt provider their TrustLine and fingerprint clearance will be revoked.

Currently, providers are required to provide the certificate program [Alternative Payment Programs (APPs), including county welfare departments (CWDs)] with evidence of licensure or, if the provider is exempt from licensure, he/she must submit a TrustLine Application with fingerprints and a Health and Safety Self-Certification that is signed by both the parent and the provider. Grandparents, aunts, and uncles are exempt from this requirement.

□ No

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care st the nu	be the status of the State/Territory's development and implementation of child andards for providers receiving CCDF that address appropriate ratios between on the children and the number of providers and group size, in terms of the the children for each type of setting. (658E(c)(2)(H))
	Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.
	Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
	Overall Target Completion Date (no later than September 30, 2016)
	 Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Partially Implemented
	o Implementation progress to date – Identify any requirement(s) partially or substantially implemented The State of California has established ratios between the number of children and the number of licensed child care providers.
	 Unmet requirement - Identify the requirement(s) not fully implemented Instead of group size requirements, California's licensed child care facilities have a maximum "capacity" that is directly associated with their license type and is based on the physical space and staffing levels of the provider.
	 Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Projected start date for each activity Projected end date for each activity Agency – Who is responsible for complete implementation of this activity Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

NOTE: Instead of group size requirements, California's licensed child care facilities have a maximum "capacity" that is directly associated with their license type and is based on the physical space and staffing levels of the provider.

- a) Licensed Center-Based Care
 - 1. Infant
 - State/Territory age definition birth to 2 years
 - Ratio 4:1
 - Group size N/A
 - 2. Toddler
 - State/Territory age definition 18 months to 30 months
 - Ratio 6:1
 - Group size 12:1
 - 3. Preschool
 - State/Territory age definition children who are enrolled in a child care center licensed by DSS and who are not enrolled in either an infant center or a school-age center
 - Ratio 12:1
 - Group size 12:1
 - 4. School-Age
 - State/Territory age definition
 Children who entered the first grade OR are in a child care program providing care and supervision exclusively to children enrolled in kindergarten and above
 - Ratio 14:1
 - Group size N/A
 - If any of the responses above are different for exempt child care centers, describe This section is under advisement, as DSS does not monitor license exempt.
 - 6. Describe, if applicable, ratios and group sizes for centers with mixed age groups N/A
- b) Licensed Group Child Care Homes: Are considered Large Family Child Care Homes in California.
 - 1. Infant
 - State/Territory age definition birth to 2 years
 - Ratio 4:1

- Group size N/A
- 2. Toddler
 - State/Territory age definition N/A
 - Ratio 4:1
 - Group size N/A
- 3. Preschool
 - State/Territory age definition N/A
 - Ratio 6:1
 - Group size N/A
- 4. School-Age
 - State/Territory age definition N/A
 - Ratio 8:1
 - Group size N/A
- 5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

Large Family Child Care Home – means a home that provides family child care for up to 12 children, or for up to 14 children if at least 2 children are school age. Also, the capacities for Large FCCHs include children under age 10 who live in the licensee's home

6. If any of the responses above are different for exempt group child care homes, describe

This section is under advisement, as DSS does not monitor license exempt providers.

- N/A. State/Territory does not have group child care homes.'
- c) Licensed Family Child Care: are considered Small Family Child Care Homes in California
 - 1. Describe the ratios, 4:1 for infants and toddler; 6:1 for preschool age children; and 8:1 for school age children, group size up to six children, or for up to eight children if at least two children are school age (including the provider's children who are present and under age 10), the threshold for when licensing is required: Licensing is required when child care is being provided in a home and that care does not fall under the scope of California law for license exempt, maximum number of children that are allowed in the home at any one time is eight if at least one child is 6 years or older and one other child is enrolled and attending kindergarten, if the State/Territory

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requires related children to be included in the Child-to-Provider ratio or group size yes, the provider's own children are included in ratios for those children under age 10, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day maximum of four infants, or up to six toddlers, or eight school – age children.

2. If any of the responses above are different for exempt family child care home providers, describe:

This section is under advisement, as DSS does not monitor license exempt providers.

d) Any other eligible CCDF provider categories: NOT APPLICABLE TO LICENSING IN CALIFORNIA
Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers
or additional school-age children that are allowed for part of the day

- a) Licensed Center-Based Care:
 - Infant lead teacher 12 core semester units in early childhood education/development semester units with 3 semester units in infant care, and 6 months experience with children under the age of 5. and assistant teacher qualifications 6 completed units of early childhood education and 18 years old, high school graduate or enrolled in a Regional Occupation Program (ROP) at an accredited high school.
 - 2. Toddler lead teacher N/A and assistant teacher qualifications N/A
 - 3. Preschool lead teacher 12 core semester units in early childhood education/development semester units and 6 months experience in a licensed child care center or comparable group child care program. and assistant teacher qualifications 6 completed units of early childhood education and 18 years old, high school graduate or enrolled in an ROP at an accredited high school.
 - 4. School-Age lead teacher 12 core semester units in early childhood education/development semester units and 6 months experience in a licensed child care center or comparable group child care program and assistant teacher qualifications N/A.
 - 5. Director qualifications Child care center directors shall have completed one of the following prior to employment:

- (1) High school graduation or GED; completion, with passing grades, of 15 semester or equivalent quarter units as specified in (h)(1)(A) and (h)(1)(B) below at an accredited or approved college or university; and at least four years of teaching experience in a licensed child care center or comparable group child care program.
 - (A) Three of the 15 units required in (h)(1) above shall be in administration or staff relations.
 - (B) Twelve of the 15 units required in (h)(1) above shall include courses that cover the general areas of child growth and development, or human growth and development; child, family and community, or child and family; and program/curriculum.
- (2) An associate of arts degree from an accredited or approved college or university with a major or emphasis in early childhood education or child development; and at least two years of teaching experience in a licensed child care center or comparable group child care program.
 - (A) Three semester or equivalent quarter units shall be in administration or staff relations.
- (3) A bachelor's degree from an accredited or approved college or university with a major or emphasis in early childhood education or child development and at least one year of teaching experience in a licensed child care center or comparable group child care program.
 - (A) Three semester or equivalent quarter units shall be in administration or staff relations.
- (4) A Child Development Site Supervisor Permit or a Child Development Program Director Permit issued by the California Commission on Teacher Credentialing.
- b) Licensed Group Child Care Homes: Numbers 1 through 4 below are N/A
 - 1. Infant lead teacher N/A and assistant qualifications N/A
 - 2. Toddler lead teacher N/A and assistant qualifications N/A
 - 3. Preschool lead teacher N/A and assistant qualifications N/A
 - 4. School-Age lead teacher N/A and assistant qualifications N/A

N/A. State/Territory does not have group child care hom	ies.
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Note: When applying for a license as a Large Family Child Care Home, it is necessary to substantiate that provider has at least one year of experience as a

regulated Small Family Child Care Home operator; or one year of experience at a licensed Child Care Center as an administrator, director, or teacher.

- c) Licensed Family Child Care home provider qualifications 15 hours of health and safety practices training as currently required by the California Day Care Act and effective January 1, 2016, a total of 16 hours of health and safety training will be required to include one hour of childhood nutrition training.
- d) Other eligible CCDF provider qualifications N/A
 - 5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.
 - a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:
 - Prevention and control of infectious diseases (including immunization)
 - Prevention of sudden infant death syndrome and use of safe sleeping practices
 - Administration of medication, consistent with standards for parental consent
 - Prevention of and response to emergencies due to food and allergic reactions
 - Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
 - Prevention of shaken baby syndrome and abusive head trauma
 - Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

\square Yes. The State/Territory certifies that it has health and safety requirements for	or
CCDF providers in these areas.	

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 - o Implementation progress to date Identify any requirement(s) partially or substantially implemented DSS has met some of these requirements for licensed providers and requires as part of provider health and safety practices training the following topics:
 - Prevention and Control of Infectious Diseases (including immunization)
 - Procedures to reduce the risk of Sudden Infant Death Syndrome (SIDS)
 - Some training for Administration of Medication
 - Training procedures to reduce the risk of Shaken Baby Syndrome
 - Transportation of Children
 - First Aid and Cardiopulmonary Resuscitation (CPR)
 - Unmet requirement Identify the requirement(s) not fully implemented

Unmet requirements include:

- Safe Sleep Practices
- Additional training for Administration of Medication
- Prevention of and Response to Emergencies due to Food Allergic Reactions
- Building and Physical Premises Safety
- Prevention of abusive head trauma
- Emergency Preparedness and response planning for emergencies resulting from a natural disaster, or mancaused event
- Handling and Storage of Hazardous Materials
- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 Health and Safety training requirements are established by the legislature and Governor. To date, there are no proposals to change this policy. The CDE has established a contract to create online training modules for the Health and Safety topics not currently required for licensed child care providers. These online training modules will be available to all providers, but not required until the Legislature takes action.

0	Projected start date for each activity
0	Projected end date for each activity
0	Agency – Who is responsible for complete implementation of this
	activity
0	Partners – Who is the responsible agency partnering with to
	complete implementation of this activity

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address these training requirements.

Yes. The State/Territory certifies that it has pre-service or orientation
and ongoing training requirements appropriate to the provider setting
that address each of the requirements relating to the topics listed
above. Describe, including at a minimum 1) how the state/territory
defines preservice or orientation period, 2) the minimum number of
annual preservice or orientation hours required to meet these health,
and safety requirements, and 3) ongoing training or education hours
required to meet these health and safety requirements

- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016) _____
 - Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 - Implementation progress to date Identify any requirement(s) partially or substantially implemented
 - Unmet requirement Identify the requirement(s)
 not fully implemented
 For licensed providers, current law requires 15
 hours of health and safety practices training and
 effective January 1, 2016 a total of 16 hours of
 health and safety training will be required to
 include one hour of childhood nutrition training for
 licensed providers. Legislation and/or regulations
 are needed to further increase requirements.
 - Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Health and Safety training requirements are established by the legislature and Governor. To date, there are no proposals to change this policy.
 - o Projected start date for each activity
 - o Projected end date for each activity

- Agency Who is responsible for complete implementation of this activity
- Partners Who is the responsible agency partnering with to complete implementation of this activity

5.1.7	Does the State/To	erritory ha	e health	and sa	fety requi	rements f	for any of	the fo	llowing
	optional areas?								

one hour of childhood nutrition training for licensed providers as part of their required 16 hours of health and safety practices training.
☐ Access to physical activity. Describe
□Screen time. Describe
☐ Caring for children with special needs. Describe
☐ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety. Describe

☑ Nutrition, Describe Effective January 1, 2016, Child Care Licensing will require

- 5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from CCDF health and safety training requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics? Note this exception applies if the individual cares ONLY for relative children.
 - Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.

The State does not conduct on-site visits for license-exempt providers. However, license-exempt providers are investigated by Child Protective Services if there is any report of abuse, neglect or any situation that affects the safety of the child. As a result of these investigations, license-exempt providers may no longer qualify for reimbursement for care provided and funding would cease. License-exempt in home providers who are not a grandparent, aunt, or uncle of the child are required to have TrustLine fingerprinting. TrustLine fingerprinting includes: state criminal background checks, FBI criminal background checks, and the child abuse and sex offender registries. If a felony is committed by an individual actively providing care as a license-exempt provider their TrustLine and fingerprint clearance will be revoked.

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		Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.
		No, relatives are not exempt from CCDF health and safety training requirements.
5.2 Mon	itoring a	and Enforcement Policies and Practices
5.2.1	to ensu	ate/Territory certifies that the State/Territory has in effect policies and practices ure that providers for children receiving assistance and their facilities comply oplicable State or local licensing and health and safety requirements.
		Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities. List the policy citation
		No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report. • Overall Target Completion Date (no later than September 30, 2016)
		 Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully

- implemented (not yet started, partially implemented, substantially implemented, other)
 - o Implementation progress to date Identify any requirement(s) partially or substantially implemented For licensed facilities, providers are regulated by the Child Day Care Act.
 - o Unmet requirement Identify the requirement(s) not fully implemented

For license – exempt facilities, providers are not subject to regulation and state legislation is necessary to implement this objective.

- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity
 - Partners Who is the responsible agency partnering with to complete implementation of this activity _____
- 5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives).
 - a) **Licensing Inspectors** It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))
 - ☑ Yes. The State/Territory certifies that it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

Health and Safety Code Section 1596.816(c) cites the qualification requirements to become hired as a DSS inspector, who are called Licensing Program Analysts (LPAs). This statute states that applicants who seek to become "persons conducting inspections of day care facilities shall meet qualifications approved by the State Personnel Board".

Health and Safety Code Section 1596.87 cites the LPA recruitment requirements and training requirements. Per Section 1596.87 subdivision (b) DSS is mandated to make efforts to recruit LPAs with child care experience, training and education. The LPAs begin their training with a four-week long comprehensive LPA Academy which has coursework that includes: the state's licensure requirements, related health and safety requirements, language and cultural diversity of the providers and which addresses being appropriate to the age of children in care and type of provider setting. In addition, Section 1596.87 subdivision (c) also requires LPAs to take 40 hours of

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Early Childhood Education training if they have not already completed sufficient coursework units. Lastly, the LPAs have regular ongoing trainings each year that include regulation administration as well as communication, writing and human relation skills, as required by Section 1596.87 subdivision (a).

Further, the 2015 State Budget Act approved DSS to expand LPA training resources by increasing the number of training staff and by adding a Southern California Training Unit.

implem includir to com 2016). I not cut	nentation ng plani plete, a Please i and pa	State/Territory must provide a State/Territory-specific on plan for achieving compliance with this requirement, ned activities, necessary legislative or regulatory steps and target completion date (no later than November 19, provide brief text responses and descriptions only. Do aste charts or tables here. Your responses will be electronically into an Implementation Plan summary
•	Overa 2016)	ll Target Completion Date (no later than November 19,
•	Currer compl impler	nt Status – Describe the State/Territory's status toward ete implementation for any requirement(s) not fully mented (not yet started, partially implemented, antially implemented, other)
	0	Implementation progress to date – Identify any requirement(s) partially or substantially implemented
	0	Unmet requirement - Identify the requirement(s) not fully implemented
•	impler	Activities – What specific steps will you take to ment the requirement (e.g., legislative or rule changes, y agreements with coordinating agencies, etc.)
	0	Projected start date for each activity
	0	Projected end date for each activity
	0	Agency – Who is responsible for complete
		implementation of this activity
	0	Partners – Who is the responsible agency partnering
		with to complete implementation of this activity

b) Inspections for Licensed CCDF Providers - It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance

with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

- ☐ Yes. The State/Territory certifies that it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits
- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)
 - Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Currently, DSS conducts a pre-licensing visit to all Family Child Care Home and Child Care Center applicant facilities to ensure the facility meets licensing requirements.

As specified in law, certain licensed Family Child Care Homes and Child Care Centers are inspected annually. All other child care facilities are inspected at least once every five years.

Additionally Community Care Licensing Program has implemented a "differential monitoring" system, known as the Key Indicator Tool (K.I.T.s), which has allowed DSS to maximize efficiencies and enable inspections to exceed the current mandate without additional resources. The K.I.T.s have been proven to be an asset helping to ensure the health and safety of children in care through robust and frequent monitoring and enforcement; however the K.I.T.s implementation has extended DSS's current resources to their full potential.

Additional funding is required to increase the current inspection rate to the approximately 45,000 licensed facilities that exist statewide in California. If annual inspections were enacted, the approximate implementation cost would be \$20.5 million; in addition to the ongoing costs needed each year to maintain an annual inspections standard.

- o Implementation progress to date Identify any requirement(s) partially or substantially implemented Legislation was enacted in 2015 to require that beginning January 1, 2017, child care facilities that are not subject to annual inspections will be visited at least once every three years.
- O Unmet requirement Identify the requirement(s) not fully implemented
 In 2015 the Legislature was unsuccessful in enacting annual inspections of licensed Family Child Care Homes and Child Care Centers by January 1, 2019, as the bill that would have enacted this provision was vetoed by the Governor.
- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - o Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity
 - Partners Who is the responsible agency partnering with to complete implementation of this activity
- c) Inspections for License-Exempt CCDF Providers (except those serving relatives) It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))
 - ☐ Yes. The State/Territory certifies that it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:
 - No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)

- Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 - Implementation progress to date Identify any requirement(s) partially or substantially implemented
 - O Unmet requirement Identify the requirement(s) not fully implemented
 DSS has jurisdiction over licensed child care facilities. DSS does not have authority over unlicensed facilities unless a business is operating as a child care facility without a license and does not meet an exemption in law. While some CCDF facilities are licensed and unlicensed, Child Care Licensing health and safety requirements are only enforced with licensed facilities.
- Tasks/Activities What specific steps will you take to implement the
 requirement (e.g., legislative or rule changes, modify agreements
 with coordinating agencies, etc.) The State of California has not yet
 established a process for monitoring license exempt facilities.
 - o Projected start date for each activity
 - Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity
 - Partners Who is the responsible agency partnering with to complete implementation of this activity
- d) Ratio of Licensing Inspectors It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))
 - The DSS Licensing Program has approximately 45,000 licensed facilities statewide. The inspector (LPA) to provider standard is approximately one LPA for every 169 Centers and 257 Homes. In order to reach and maintain a ratio at this level, DSS has sought to maximize the efficiencies of inspector caseloads by implementing the following initiatives:
 - Differential monitoring (Key Indicator Tool or K.I.T.) inspections were implemented and have served to maximize the efficiency of time spent on inspection visits.
 - An online format for new provider orientations was implemented to reduce the amount of in-office-time the LPAs would spend scheduling and

conducting in-person orientations for providers; thus increasing the amount of field-time available for LPAs to conduct inspection visits.

 A centralized complaint and information hotline was implemented to reduce the amount of in-office-time the LPAs would spend taking and responding to phone calls; thus increasing the amount of field-time available for LPAs to conduct inspection visits.

These initiatives have enabled DSS to reach the full potential for inspector caseloads reflected by the improved ratios seen above and additional funding would be necessary to further improve upon the current inspector to provider standard.

Yes. The State/Territory certifies that it has policies and practices
regarding the ratio of licensing inspectors to such child care
providers and facilities in the State/Territory. List the policy
citation and list the State/Territory ratio of licensing
inspectors:

- □ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)
 - Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 - Implementation progress to date Identify any requirement(s) partially or substantially implemented
 - Unmet requirement Identify the requirement(s) not fully implemented
 - Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity

- Projected end date for each activity
- Agency Who is responsible for complete implementation of this activity
- Partners Who is the responsible agency partnering with to complete implementation of this activity
- e) Child Abuse and Neglect Reporting That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))
 - ☑Yes. Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s) For licensed facilities, the DSS requires all mandated reporters (providers and their staff) to sign a form expressing their knowledge and responsibility to report known or suspected child abuse per the California Penal Code Section 11166.5. Additionally, beginning January 1, 2018, child care providers and their staff will be required by DSS to complete training on their mandated child abuse reporter duties and to renew their training every two years.
 - □ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)
 - Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
 - Implementation progress to date Identify any requirement(s) partially or substantially implemented
 - Unmet requirement Identify the requirement(s) not fully implemented
 - Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity

- Partners Who is the responsible agency partnering with to complete implementation of this activity
- 5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from inspection requirements. Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?
 - ☑ Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care. The State does not conduct on-site visits for license-exempt providers. However, license-exempt providers are investigated by Child Protective Services if there is any report of abuse, neglect or any situation that affects the safety of the child. As a result of these investigations, license-exempt providers may no longer qualify for reimbursement for care provided and funding would cease. License-exempt in home providers who are not a grandparent, aunt, or uncle of the child are required to have TrustLine fingerprinting. TrustLine fingerprinting includes: state criminal background checks, FBI criminal background checks, and the child abuse and sex offender registries. If a felony is committed by an individual actively providing care as a license-exempt provider their TrustLine and fingerprint clearance will be revoked.

\square Yes, some relatives are exempt from inspection requirements. If the
State/Territory exempts some relatives from the inspection requirements
describe which relatives are exempt and include how the State/Territory
ensures the health and safety of children in relative care.

No, relatives are not exemp	ot from i	nspection	requirement	S.
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5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories are required to have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017. The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective

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child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member. Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness. Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1		be the status of the State/Territory's requirements, policies, and procedures for all background checks for child care staff members and child care providers.
		Fully implemented and meeting all Federal requirements outlined above. List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.
	\boxtimes	Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to

complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2017)
 September 30, 2017
- Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) California has a comprehensive and vigorous system of conducting criminal record background checks that requires a clearance prior to the individual working or being present in a facility, and the criminal record reviews continue after hiring. The California Department of Social Services (CDSS) currently receives subsequent arrest and conviction information and subsequent substantiated child abuse information via an electronic interface with the California Department of Justice (DOJ) through the criminal record background check process. CDSS also receives the Federal Bureau of Investigation (FBI) criminal history.

Conducting criminal record background checks on child care staff members every five years and searches of other state criminal histories, sex offender registries, and child abuse registries, would be a new requirement for the CDSS and will require significant additional staffing resources. These additional checks coupled with the new requirement to conduct checks of the National Sex Offender Registry (NSOR) and the National Crime Information Center (NCIC) will require almost 280 additional CDSS staff. Additional resources will be required for both the CDSS Legal and Information Systems Divisions and automation costs.

Currently, 80 CDSS staff perform criminal record background checks on all programs, including child care, foster care, and senior care. The additional 280 staff members would be dedicated solely to child care background checks.

Changes in State legislation and regulations will be necessary to give CDSS the authority to meet these new requirements. In addition, legislation is necessary to enable CDSS to utilize information received from the NCIC and NSOR checks.

- Implementation progress to date Identify any requirement(s) partially or substantially implemented
- Unmet requirement Identify the requirement(s) not fully implemented The requirements that are not fully complete or implemented are: Conducting criminal record

background checks every five years, conducting searches of state criminal record and sex offender registries in states where the individual resided in the preceding five years, checks of out-of-state child abuse registries for child care where the individual resided for the preceding five years, a check of the National Crime Information Center (NCIC) database, and the National Sex Offender Registry (NSOR).

•	ement (e.g., legislative or rule changes, modify agreements pordinating agencies, etc.)
0	Projected start date for each activity
0	Projected end date for each activity
0	Agency – Who is responsible for complete implementation of this activity
0	Partners – Who is the responsible agency partnering with to complete implementation of this activity

Tasks/Activities – What specific steps will you take to implement the

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and appealing the results of background checks.

Process for conducting background checks in a timely manner: California has one of the most robust and comprehensive background check processes in the nation. State law requires a criminal record clearance prior to working or being present in licensed facilities. This reflects collaboration between the individuals, associated facility licensees, the California DOJ, the FBI and the CDSS. Utilizing LiveScan technology, the individual submits fingerprints to the DOJ and the FBI. Additionally, the individual submits information for a name-based check of California's child abuse registry, the Child Abuse Central Index (CACI). California received and processed approximately 190,000 fingerprint submissions for all licensed programs during state fiscal year 2014-15.

Historically, 90% of these submissions result in a prompt and direct criminal record clearance from DOJ, which is electronically transmitted to CDSS.

For licensed care and license-exempt child care (TrustLine), DOJ sends clearance notification to the licensee and CDSS in approximately five days from fingerprint submission. Based upon the fingerprint submissions, DOJ transmits all subsequent arrest and conviction information to CDSS as authorized by statute. DOJ also provides subsequent child abuse information to CDSS. Individuals with criminal history

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undergo an additional criminal record exemption process as outlined below in section 5.3.5.

Protecting the privacy of child care staff members: The CDSS is prohibited by state law from sharing criminal history information, including substantiated child abuse information, with any person other than the individual for whom the criminal history applies.

Appealing the results of background checks: All individuals who are disqualified due to a specified crime, who have been denied a criminal record exemption, or who have been denied a clearance due to conduct related to an arrest, have a right to appeal the decision and request an administrative hearing with an Administrative Law Judge. Denial letters issued by CDSS include appeal rights and the process to request a hearing. These due process protections are clearly established in state law.

- 5.3.3 Describe how the State/Territory is helping other States process background checks, including any agencies/entities responsible for responding to requests from other states The CDSS responds to inquiries from other states seeking clarification on California's background check process. This response is completed informally and is on a case by case basis. The California DOJ processes Child Abuse Central Index requests from other states.
- 5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

	criminal record exemption process, which is required for any criminal conviction other than a minor traffic offense.
	□No
5.3.5	Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 5.3?
	□Yes. Describe □No

5.3.6 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from background check requirements. Note this exception only applies if the individual cares ONLY for relative children. Does your State State/Territory exempt relatives from background checks?

 \square Yes, all relatives are exempt from all background check requirements.

☑ Yes, some relatives are exempt from the background check requirements.

Describe which relatives are exempt. For license-exempt care, grandparents,

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aunts, and uncles of the child in care are exempt from all background check requirements.

- \square No, relatives are not exempt from background checks.
- 5.3.7 Describe how the State/Territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether conducted by the State/Territory or a 3rd party vendor or contractor, Lead Agencies can report that no fees are charged if applicable. Currently, child care providers are responsible for paying fingerprint fees for the state DOJ check, the FBI check, and the Child Abuse Central Index check in addition to the LiveScan vendor's rolling fees. License-exempt providers completing the TrustLine process may have additional application fees that may be reimbursed locally. Fees may be reimbursed by CDSS or the CDE dependent upon the child care subsidy program being used.
- 5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue Information about the background check process is available on the CDSS, CCLD public website (http://ccld.ca.gov/PG404.htm). This website provides information about who is required to undergo a criminal background check, as well as a detailed description of the criminal record review process. There also is a public website for the TrustLine Registry Program (www.trustline.org), which refers parents and other consumers to the CCLD website for background check information.

5.3.9	9 Does the Lead Agency release aggregated data by crime?		
	\square Yes. List types of crime included in the aggregated data $_$		
	⊠No		

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional

development that includes professional standards, a "career ladder" that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children's development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State/Territory's professional development system or framework, including training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

The Lead Agency assures that the State/Territory's training and professional development requirements:

- a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and midlevel training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).
- b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.
- c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)
- d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF
- e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.
 - ☑ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.
 - □ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

- Implementation progress to date Identify any requirement(s) partially or substantially implemented
- Unmet requirement Identify the requirement(s) not fully implemented
- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity
 - Partners Who is the responsible agency partnering with to complete implementation of this activity _____
- 6.1.2 Describe how the State/Territory provides ongoing training and professional development that is accessible for the diversity of providers in the State/Territory, provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities) and improves the quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development. Check all that apply.
 - State/Territory professional standards and competencies. Describe:

The California Early Childhood Educator Competencies (ECE Competencies) describe the knowledge, skills and dispositions that early childhood educators need in order to provide high quality care and education to young children and their families. The ECE Competencies are aligned with the California Preschool Learning Foundations and the California Infant/Toddler Learning & Development Foundations to guide professional development and related quality improvement activities. The ECE Competencies are organized into twelve overlapping areas: (1) Child Development and Learning; (2) Culture, Diversity and Equity; (3) Relationships, Interactions, and Guidance; (4) Family and Community Engagement; (5) Dual-Language Development; (6) Observation, Screening, Assessment, and Documentation; (7) Special Needs and Inclusion; (8) Learning Environments and Curriculum; (9) Health, Safety, and Nutrition; (10) Leadership in Early Childhood Education; (11) Professionalism; and (12) Administration and Supervision. The term *early* childhood educator includes everyone responsible for the care and education of young children.

The ECE Competencies are research-based, and are aligned with the California Preschool Learning Foundations

(http://www.cde.ca.gov/sp/cd/re/psfoundations.asp) and the *California Infant/Toddler Learning & Development Foundations* (http://www.cde.ca.gov/sp/cd/re/itfoundations.asp) to guide professional development and related quality improvement activities.

The ECE Competencies also competency contexts: Supporting Early Learning and Development; Planning and Guiding Early Learning and Development; Creating and Maintaining Program Policies and Practices; and Advancing the Early Childhood Profession. More information can be found at: http://www.cde.ca.gov/sp/cd/re/ececomps.asp

☐ Career ladder or lattice. Describe:

California has a career ladder for staff in CDE-contracted state preschool programs and child care and development programs. Information about the Child Development Permit system is available at: http://www.ctc.ca.gov/credentials/CREDS/child-dev-permits.html

- Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe:
 - The CDE has been engaged in an alignment of the core Early Childhood Education/Child Development (ECE/CD) courses for its Community Colleges through a Curriculum Alignment Project (CAP). 102 Community Colleges in California have agreed to participate in CAP. Of these colleges, 87 are officially aligned and 3 others are in the revision process to align their courses. The CAP courses have been accepted as the required core for the Associate in Science for Transfer (ADT) in Early Childhood Education. For information on the courses and the degree, go to http://www.c-id.net. The CAP courses are the foundation for the ADT in ECE. To view a list of California State Universities who have a program similar to the ADT in ECE visit: (http://www.calstate.edu/transfer/adt-search/search.shtml)
- Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe: CDE/EESD allocates funding that is distributed by local R&Rs to child care providers upon providing proof that they have completed the sixteen hours of

California Emergency Services Authority (EMSA)-approved training that is required for child care licensure in California. EMSA maintains a list of training agencies utilizing EMSA-approved curricula.

Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe:

The California ECE Workforce Registry is a state, regional and local collaboration designed to track and promote the education, training and experience of the early care and education workforce for the purpose of

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improving professionalism and workforce quality to positively impact children. More information can be found at: https://www.caregistry.org/

California also utilizes a "participant profile" for individuals in the workforce who are accessing CDE ECE Quality Improvement professional development services. The most recent data can be found at: http://www.cde.ca.gov/sp/cd/re/qipdprofilereport2015.pdf

Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe:

California has an Early Childhood Education Professional Learning Team that reports regularly to the State Advisory Council for Early Learning and Care.

Continuing education unit trainings and credit-bearing professional development. Describe:

Many of the state approved trainings identified below offer continuing education units. Academic units for the Program for Infant/Toddler Care are available through a local community college or state university.

State-approved trainings. Describe:

California provides multi-pronged strategies to provide ongoing training and professional development to help teaching staff understand research and best practices to meet the developmental needs of children and improve the quality and stability of the child care workforce. This includes:

91 of the 102 community colleges across California have aligned 24 units of early childhood coursework. This includes articulation agreements with state universities.

- State-approved training can be found at the Child Development Training Consortium's Training Portal at https://www.childdevelopment.org/cs/cdtc/print/htdocs/home.htm
- Online training modules are available 24 hours per day at California Early Childhood Online (CECO), which includes modules on California's early learning guidelines, i.e., Foundations, and their companion Curriculum Frameworks. http://www.caearlychildhoodonline.org
- In-depth training and technical assistance regarding appropriate care for infants and toddlers and the Infant/Toddler Learning and Development Foundations is provided by the Program for Infant Toddler Care (PITC). PITC has institutes for training of trainers and a network of regional "Partners for Quality" designed for on-site work: http://www.pitc.org
- Training and technical assistance based on the Preschool Learning
 Foundations and Curriculum Frameworks is delivered regionally through

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county offices of education via the California Preschool Instructional Network (CPIN). http://cpin.us/

- Family Child Care at Its Best provides high-quality, child development education specifically for the family child care home (FCCH) provider. http://humanservices.ucdavis.edu/ChildDev/Programs/FamilyChildCare
- R&R agencies provide a variety of training and supports for prospective and current FCCH providers through the Child Care Initiative Project (CCIP) that focuses on business practices, as well as child growth and development. http://www.rrnetwork.org/
- The Desired Results Training and Technical Assistance Project provides training and technical assistance in the implementation of the Desired Results system, including assessing children with the Desired Results Developmental Profile® (DRDP). http://www.desiredresults.us
- The California Collaborative on the Social and Emotional Foundations for Early Learning (CACSEFEL) is focused on promoting the social emotional development and school readiness of young children birth to age 5 through on-site training and coaching. http://cainclusion.org/camap/cacsefel.html.
- Information for the Preschools Shaping Healthy Impressions through Nutrition and Exercise (SHINE) program is a recognition and coaching program that showcases child care programs that excel in promoting the health and well-being of children. http://www.cde.ca.gov/ls/nu/he/preschoolshine.asp.
- Transitional kindergarten (TK) Professional Development will be focused on promoting quality TK programs with high-qualified instructional staff. Information related to specific TK professional learning is being developed. Information related to TK program information is available at: http://www.cde.ca.gov/ci/gs/em/kinderfaq.asp
- ☐ Inclusion in state and/or regional workforce and economic development plans. Describe:

A number of the local child care planning councils are included in their regional workforce or economic development plans.

California's Early Childhood Educator Self-Assessment Toolkit (ECE CompSAT) is an online, comprehensive professional development website with interactive and self-reflective activities and videos highlighting research-based guidance on the ECE Competencies. http://www.ececompsat.org/

- 6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC
 - ECE CompSAT was developed with SAC funding. The state's ECE Professional Learning Team, which has cross-sector representation, reports regularly to the SAC.
- 6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

The CDE has a comprehensive system for ensuring that training and professional learning incorporate early learning guidelines, health and safety standards and social-emotional/behavior intervention models. The CDE incorporates knowledge and application of the State's early learning and developmental guidelines in all of the professional development opportunities outlined in Section 6.1.2. California supports health and safety standards training through contracts to the California Resource and Referral agencies http://www.rrnetwork.org California incorporates and supports social-emotional behavior intervention models, which include positive behavior interventions and supports through the CACSEFEL, which provides in-depth training and coaching and are provided through a resource website called MAP to Inclusion and Belonging www.cainclusion.org. The California Inclusion and Behavior Consultation Network (CIBC) provides intervention supports to early childhood teachers as they teach children with special needs or challenging behaviors https://www.cibc-ca.org/.

CCDF Quality funds support the Faculty Initiative Project

(http://facultyinitiative.wested.org/) which develops instructional guides for faculty on the *Preschool Learning Foundations* and *Curriculum Framework*. Work will include the *Infant/Toddler Learning and Development Foundations and Framework*. RTT-ELC funds were used to develop an accessible website

(http://www.caearlychildhoodonline.org) for foundational online modules on the Foundations and Frameworks and CSEFEL; Health and Safety modules will be developed or secured for this site. The PITC is funded to provide in-person training of the Infant/Toddler Learning and Development Foundations and Framework. CPIN is the system for training on the Preschool Foundations and Frameworks. California has a state CSEFEL Leadership Team with representation from professional development systems to ensure that the teaching pyramid principles are incorporated into training and consistent across systems.

6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)

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All training and resources are available to California Indian tribes and tribal organizations who receive CCDF funds. Communication with California Tribes is facilitated through quarterly Tribal Roundtable meetings. Staff persons from the CDE EESD are regular participants and contributors to the meetings.

6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

California has a comprehensive system for ensuring that training and professional learning incorporate early learning guidelines, health and safety standards and social-emotional/behavior intervention models. The PITC is funded to provide in-person training of the Infant/Toddler Learning and Development Foundations and Framework. CPIN is the system for training on the Preschool Foundations and Frameworks. California has a state CSEFEL Leadership Team with representation from professional development systems to ensure that the teaching pyramid principles are incorporated into training and consistent across systems.

The *Preschool English Learner (PEL) Guide* was developed to assist early childhood teachers in supporting English language development of children http://www.cde.ca.gov/sp/cd/re/documents/psenglearnersed2.pdf. Each of the CPIN teams has an English Learner lead that specifically trains and provides support for teachers of dual language learners. *Inclusion Works!* provides strategies and guidance for inclusive practices.

http://www.cde.ca.gov/sp/cd/re/documents/inclusionworks.pdf .

California has redesigned the early childhood assessment instrument, DRDP assessment, with sensitivity to assess the development of all children including those with IEPs or IFSPs

http://www.cde.ca.gov/sp/cd/ci/documents/drdp2015preschool.pdf

Individuals working in Infant/Toddler centers are required to have 6 units of Infant/Toddler coursework. The child development permit offers specialization in school-age care.

- 6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.
 - ☑ Financial assistance for attaining credentials and post-secondary degrees. The California Student Aid Commission, using CCDF funds, offers the Child Development Grant Program (Program). The Program is a need-based grant designed to encourage students to enter the field of child care and development in a licensed children's center. Students who plan to enroll at least half-time in coursework leading to a Child Development Permit as teacher, master teacher, site supervisor or program director, are eligible to apply through the institution they plan to attend. Applications must be

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submitted directly to the school of attendance. To receive funding, students must sign a Service Commitment Agreement stating they will provide one year of full-time service in a licensed children's center for each year they receive the grant. http://www.csac.ca.gov/doc.asp?id=110

The Child Development Training Consortium (CDTC) uses CCDF funds to pay the application and fingerprint processing fees (if applicable) for the Child Development Permits, including permits with a School-Age Emphasis. https://www.childdevelopment.org/cs/cdtc/print/htdocs/services_permit.htm

Likewise, the CDTC offers the Career Incentive Grant program which reimburses eligible students the cost of their tuition, books, and other required enrollment fees. Career Incentive Grants are available (in priority order) to students who are:

- Recipients of permit waivers issued by the CDE/EESD
- Employed in low Academic Performance Index (API) service areas (as defined by CDE) through employment at a CDE/EESD funded program
- Attending 4-year colleges or universities or 4-year extension programs

Career Incentive Grants (CIG) are available to reimburse students for their out-of-pocket expenses from enrollment fees, which include registration fees, tuition, health fees and other required student fees. The cost of books is also reimbursable. All expenditures must be verified with original receipts. Reimbursable courses must lead to a Child Development Permit. Physical education and general work experience classes are not eligible for reimbursement. Child Development work experience is reimbursable. A grade of "C" or better or "Credit" is required for each class. Grades must be verified with an original grade card, transcript or letter from the instructor on college letterhead. All course work must be taken at an accredited institution that is accepted by the California Commission on Teacher Credentialing. The deadline to submit 2015-2016 CIG applications will be June 20, 2016. Reimbursement Limits: Up to \$1,500 per year for 4-year college students. https://www.childdevelopment.org/cs/cdtc/print/htdocs/services ci.htm

Financial incentives linked to education attainment and retention. Describe

AB 212 Child Development Staff Retention Funds are provided to LPCs for
child care staff retention activities to retain qualified staffs who work directly
with children in EESD-contracted centers or family child care home education
networks. The LPCs develop countywide plans in accordance with approved
guidelines and submit these plans to the EESD for review and approval. The
funds are intended to supplement, not supplant, existing efforts and
investments to retain qualified child care staff at the local level. There are
currently LPCs representing each county in California. The most recent report
can be found at: http://www.cde.ca.gov/sp/cd/re/lrlpcreport2012.asp

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		Registered apprenticeship programs. Describe The California Department of Industrial Relations has a Child Development Educator Apprenticeship Program. http://www.dir.ca.gov/das/ChildDevelopmentEducatorApprenticeshipProgram.html
		Outreach to high school (including career and technical) students. Describe
		Policies for paid sick leave. Describe
		Policies for paid annual leave. Describe
		Policies for health care benefits. Describe
		Policies for retirement benefits. Describe
		Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe:
		California Child Care Initiative Project (CCIP) and Family Child Care at its Best (FCCB) training of trainer modules include training to support family child care providers around reflective practices and stress management. The CDE/EESD offers several quality improvement activities that support providers' mental health and the use of reflective practices. The CIBC Network is designed to respond to requests for technical assistance from administrators and teachers in early care and education programs. A network of experienced, local consultants provides on-site consultation to build the capacity of the programs and providers to respond effectively to children with special needs or challenging behaviors. Consultants have knowledge of relationship-based practices and community resources and are skilled in problem-solving issues around inclusion and challenging behaviors. Consultants meet with staff, observe the environment, facilitate reflective practice conversations, collaborate on the development of an action plan for the teacher, and support site implementation of those plans. They utilize reflective practice techniques with providers.
		The R&R CCIP and FCCB both are attentive to providing support to address provider stress.
		Other. Describe
6.1.8	first lar	be how the State/Territory will recruit providers for whom English is not their nguage, or who will serve and be available for families for whom English is not erst language.

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The local R&Rs agencies conduct language cohort outreach to address the need for diverse linguistic and cultural providers. Individuals recruited from this process have the opportunity to participate in the CCIP, Health and Safety Training and the online resources at CECO.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom

English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.
☐ Informational materials in non-English languages
Training and technical assistance in non-English languages
CCDF health and safety requirements in non-English languages
Provider contracts or agreements in non-English languages
Website in non-English languages
Bilingual caseworkers or translators available
igtimes Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
In addition to the English versions of the California Infant/Toddler Learning and Development Foundations and Curriculum Framework http://www.cde.ca.gov/sp/cd/re/itfoundations.asp and the California Preschool Learning Foundations and Frameworks http://www.cde.ca.gov/sp/cd/re/psfoundations.asp these Foundations and Frameworks have been translated into Spanish and Spanish translations are in the process of final editing before publication.
the process of final editing before publication.

Specific training is provided through the PITC and CPIN networks to train teaching staff in culturally relevant strategies. Each CPIN team has an EL Lead who supports the inclusion of children who are dual language learners. California also developed a publication called the *Preschool English Learners Resource Guide* which is available in both English and Spanish. This is the training guide used by the CPIN EL leads.

http://www.cde.ca.gov/sp/cd/re/documents/psenglearnersed2.pdf
Additionally, in 2013 six papers were developed regarding California's Best
Practices for Young Dual Language Learners: Research Overview Papers. These are available at

http://www.cde.ca.gov/sp/cd/ce/documents/dllresearchpapers.pdf
Recently released *Preschool Program Guidelines* has a specific chapter
dedicated to addressing the program needs of young Dual Language Learners.
http://www.cde.ca.gov/sp/cd/re/documents/preschoolproggdIns2015.pdf

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This document also has a two-disk DVD set which includes sections on young dual language learners. The local R&Rs agencies conduct language cohort outreach and training for the CCIP, Health and Safety Training and the online resources at CECO. None If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages To the extent feasible, the CDE provides all of the resources available in both English and Spanish. 6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2). ☐ Yes. The State certifies that no later than September 30, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers No. The State/Territory must provide a State/Territory-specific
 ■
 No. The State/Territory-specific
 No implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report. Overall Target Completion Date (no later than September 30, 2016) Current Status – Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Implementation progress to date – Identify any requirement(s) partially or substantially implemented Module development is

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underway by a contract

- Unmet requirement Identify the requirement(s) not fully implemented
- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - o Projected end date for each activity
 - Agency Who is responsible for complete implementation of this activity
 - Partners Who is the responsible agency partnering with to complete implementation of this activity

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

- 6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?
 - - a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

The CDE has developed and uses the Desired Results Developmental Profile (DRDP) to measure children's progress. Training is provided on how to utilize the DRDP results to inform curriculum planning and continuous quality improvement.

- b) Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe The CDE contracts with WestEd Center for Child and Family Studies to conduct training on the DRDP for Direct Services contractors.
 - ☑ Other funds. Describe IDEA Part B Funds are used to ensure the assessment system is responsive to children with IFSPs and IEPs. These funds are used to provide training and technical assistance to special education educators.

- c) Check which content is included in training and professional development activities. Check all that apply.
 - ☑ Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe
 The core content of the training provided by the CDE/EESD quality improvement professional development providers is the core content is based on the state's Early Learning and Development Foundations and Curriculum Framework. These Foundations and Frameworks include all of the essential domains are research-based and provide strategies for implementation.
 - ☑ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social -emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2). Describe The Infant/Toddler and Preschool Curriculum Frameworks and Program Guidelines provide guidance on addressing positive social and emotional development as well as strategies for challenging behaviors. The CCSEFEL provides training and coaching on the teaching pyramid. http://www.cainclusion.org/teachingpyramid/. Family Child Care at its Best (FCCIB) also provides a training series on the teaching pyramid: Module 1: Building Relationships and Creating Supportive Environments and Module 2: Social-Emotional Teaching Strategies. https://humanservices.ucdavis.edu/programs/centerexcellence-child-development/family-child-care-its-bestprogram. FCCIB also provides training on the teaching pyramid. Local R&R programs provide training on Strengthening Families and the five protective factors.
 - Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe

 The All About Young Children website was developed to assist parents and families to learn more about what skills help children learn, how they learn language, how they learn about feelings and relationships, how they learn about numbers, and how they become skillful at moving their bodies. It is offered in eight languages (English, Spanish, Hmong, Russian, Chinese traditional and simplified, Tagalog, and Vietnamese) at:

https://allaboutyoungchildren.org/ and provides videos and hints to supporting children's development.

☑ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards. Describe The CDE has developed Infant/Toddler and Preschool Curriculum Frameworks that are research- and evidence-based, and aligned to the state's early learning guidelines, and the Foundations. Providers are encouraged to use these documents to ensure they are offering developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with State standards.

See the documents at

http://www.cde.ca.gov/sp/cd/re/itframework.asp and http://www.cde.ca.gov/sp/cd/re/psframework.asp.

On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe

The California Department of Developmental Services (CDDS) supports a system of Family Resource Centers (FRC). Families of infants and toddlers can receive parent-to-parent support from Early Start FRCs. FRCs actively work in partnership with local regional centers and education agencies and help many parents, families and children get information about early intervention services and how to navigate the Early Start system. California's FRC are staffed by parents who have children with special needs and provide information and parent-to-parent support. Each FRC is unique, reflecting the needs of their community. They may operate as independent sites or be based in regional centers, local education agencies, public health facilities, hospitals or homes. Family support services are available in many languages and are culturally responsive to the needs of the individual family. Information at: http://www.dds.ca.gov/EarlyStart/FamilyResources.cfm. There is a network of FRCs, http://www.frcnca.org/, and many receive additional funding and support for local county First 5 commissions.

☑ Using data to guide program evaluation to ensure continuous improvement. Describe

Programs under contract with the CDE/EESD conduct an annual self-assessment using the results of the DRDP, the respective Environment Rating Scale (ERS) Tool, and parent survey results to inform continuous program improvement.

Programs participating in their local QRIS develop program improvement plans to support continuous program improvement, using their CLASS and ERS results.

 □ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe

Priority for free CCDF-sponsored professional development goes to providers in low performing school areas or in those locations with a heavy concentration of schools designated as high poverty and receiving Title I funding.

☐ Caring for and supporting the development of children with disabilities and developmental delays. Describe The CDDS offers families whose infants or toddlers have a developmental delay or disability or an established risk condition with a high probability of resulting in a delay, the opportunity to receive an "Early Start" in California. Teams of service coordinators, healthcare providers, early intervention specialists, therapists, and parent resource specialists evaluate and assess infants or toddlers and provide appropriate early intervention and family support services for young children from birth to three years of age. http://www.dds.ca.gov/EarlyStart/home.cfm PITC offers four modules to enhance participants' abilities to provide training that supports providers in the care of infants and toddlers with disabilities and special needs. Beginning Together (http://cainclusion.org/bt/) was created in collaboration with the CDE/EESD and WestEd, Center for Child and Family Studies as an inclusion support to the PITC. The purpose of *Beginning Together* is to ensure that children with special needs are incorporated, and appropriate inclusive practices are promoted, in the training and technical assistance provided by the existing cadre of CDE/EESD and WestEd certified trainers in the PITC. This is accomplished through a "training of trainers" institute, regional outreach activities, revision/development of written materials, support to institute graduates, and support of inclusive practices in other PITC activities, such as the demonstration programs.

CA CSEFEL and the CIBC Network, support the inclusion of children with disabilities in child care settings.

☑ Supporting positive development of school-age children.

Describe School-Age Consortium (CalSAC) offers 20 free eLearning courses made possible by the CDE, using CCDF funds. CalSAC's Collabornation eLearning Environment also includes hundreds of courses relevant to afterschool, summer

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	and school-age care including a 36 course series with in-depth curriculum content, interactivity, and certificates. https://calsac.org/training		
	Other. Describe		
availal for pu	how the State/Territory connects child care providers with ole Federal and State/Territory financial aid, or other resources rsuing postsecondary education relevant for the early childhood hool-age workforce. Check all that apply.		
	Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling		
	State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities		
	Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education		
	Other. Describe See responses to other questions in this chapter.		
No 6.2.2 Does the State/Territory require a specific number of annual training hours for children providers caring for children receiving CCDF subsidies and in particular content areas? States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.			
⊠Yes. If yes, desci	ibe:		
a) Licensed	Center-Based Care Number of pre-service or orientation hours and any required areas/content 16 hours		
2)	Number of on-going hours and any required areas/content CPR and First Aid certificates/trainings must be renewed every 2 years.		
b) Licensed	Group Child Care Homes		
	Number of pre-service or orientation hours and any required areas/content 16 hours		
2)	Number of on-going hours and any required areas/content CPR and First Aid certificates/trainings must be renewed every 2 years.		

- c) Licensed Family Child Care Provider
 - 1) Number of pre-service or orientation hours and any required areas/content 16 hours
 - 2) Number of on-going hours and any required areas/content CPR

		years.
	d) Any	other eligible CCDF provider
	1)	Number of pre-service or orientation hours and any required areas/content
	2)	Number of on-going hours and any required areas/content License-exempt providers who receive CCDF subsidy are not required to participate in training.
	No	
6.2.3 Describe	the status o	f the State/Territory's policies and practices to strengthen
provider	's business p	ractices.
; ; ;	and technical include, but in budgeting, re risk managen and parent-p	ented. Describe the State strategies including training, education, assistance to strengthen provider's business practices. This may s not limited to, such practices related to fiscal management, cord-keeping, hiring, developing, and retaining qualified staff, nent, community relationships, marketing and public relations, rovider communications, including who delivers the training, d/or technical assistance
i i (mplementatincluding plan complete, an Please providuaste charts o	nted. The State/Territory must provide a State/Territory-specific ion plan for achieving compliance with this requirement, nned activities, necessary legislative or regulatory steps to d target completion date (no later than September 30, 2016). The brief text responses and descriptions only. Do not cut and for tables here. Your responses will be consolidated electronically mentation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) The Child Care Initiative Project meets the requirements for family child care providers.
- Current Status Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) _____
 - Implementation progress to date Identify any requirement(s) partially or substantially implemented The Child Care Initiative Project meets the requirements for family child care providers.
 - Unmet requirement Identify the requirement(s) not fully implemented

The CDE currently does not have a program for center-based providers' business practices.

- Tasks/Activities What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Secure a contractor to conduct annual Leadership Academies
 - Projected start date for each activity July 1, 2016
 - o Projected end date for each activity June 30, 2017
 - Agency Who is responsible for complete implementation of this activity California Department of Education
 - Partners Who is the responsible agency partnering with to complete implementation of this activity

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. **States and Territories** may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

- 6.3.1 Describe the status of the State/Territory's early learning and development guidelines appropriate for children from birth to kindergarten entry.
 - The State/Territory assures that the early learning and development guidelines are:
 - Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
 - Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated crossagency body if there is no SAC
 - Updated as determined by the State. List the date or frequency
 - California has developed research-based early learning guidelines; these are the *Infant/Toddler Learning and Development Foundations* and the *Preschool Foundations*. This has been an intentional systematic process. Documents are revised and updated on a systematic basis generally between every ten to 15 years. For example, the *Prekindergarten Learning*

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and Development Guidelines was released in 2000. It has been revised and updated as the California Preschool Program Guidelines (Spring 2015).

	nted and meeting all Federal requirements outlined e Lead Agency's policy citation(s) and describe using a 6.3.4 below
State/Territo compliance w necessary leg completion d provide brief paste charts o	mented. The State/Territory must provide a ry-specific implementation plan for achieving with this requirement, including planned activities, islative or regulatory steps to complete, and target ate (no later than September 30, 2016). Please text responses and descriptions only. Do not cut and or tables here. Your responses will be consolidated into an Implementation Plan summary report.
	Target Completion Date (no later than September 6)
toward not full	t Status – Describe the State/Territory's status complete implementation for any requirement(s) y implemented (not yet started, partially nented, substantially implemented, other)
0	Implementation progress to date – Identify any requirement(s) partially or substantially implemented
0	Unmet requirement - Identify the requirement(s) not fully implemented
implem	Activities – What specific steps will you take to nent the requirement (e.g., legislative or rule s, modify agreements with coordinating agencies,
0	Projected start date for each activity
0	Projected end date for each activity
0	Agency – Who is responsible for complete implementation of this activity
0	Partners – Who is the responsible agency partnering with to complete implement this activity

6.3.2	Check develo		_	e group(s) the State/Territory has established early learning and lines:
		-		ee. Provide a link:
	nti	.p://w	ww.ca	e.ca.gov/sp/cd/re/itfoundations.asp
	\boxtimes	Three	e-to-Fiv	ve. Provide a link:
	<u>htt</u>	:p://w	ww.cd	e.ca.gov/sp/cd/re/psfoundations.asp
		Birth-	to-Five	e. Provide a link
	со	mplem	nent bu	ler (check if State/Territory has standards for five and older that at cover child development areas not covered by k-12 academic cribe and provide a link
6.3.3	Does t implen assista emotio	he Stannentatence to onal de	te/Terrion of child of evelopr	ribe ritory use CCDF quality funds to improve on the development or early learning and development guidelines by providing technical care providers to enhance children's cognitive, physical, social and ment and support children's overall well-being? Ite/Territory has a system of technical assistance operating cory-wide
				te/Territory has a system of technical assistance operating as a few localities but not State/Territory-wide
		No, b	out the	State/Territory is in the development phase
		No, t	he Sta	te/Territory has no plans for development
		a)	If yes	, check all that apply to the technical assistance and describe.
				Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines. Describe: As mentioned in section 6.1, early childhood educators are supported through guidance documents of the Infant/Toddler Curriculum Framework and Program Guidelines, with technical assistance (TA) provided by PITC, the Preschool Curriculum Framework and Program Guidelines, with TA provided by CPIN, and on both sides of Frameworks and Guidelines for Early Learning in Child Care Home Settings, with TA provided by R&Rs and FCCIB. The California Early Childhood Mentor Program (CECMP) uses these documents to support their mentees.

- The technical assistance is linked to the State's/Territory's quality rating and improvement system. Describe: The RTT-ELC QRIS is located in 16 counties and 14 mentee counties. These 30 counties represent 93 percent of California's State Preschool population. Additional counties are developing a QRIS, many with the appropriated \$50 million in State Preschool QRIS block grant funds. In addition to the available state CCDF TA, these counties have invested additional local funds to support coaching and TA
- □ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe: CECO has foundational modules on the Infant/Toddler Foundations and Framework; the PITC Regional Partners for quality provide TA on them. R&Rs, CECMP mentors, and FCCIB are trained on these documents and use them to inform their TA. The Infant Toddler QRIS Block Grant described in section 4.3.4 also may provide access to technical assistance.
- □ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe: CECO has foundational modules on the Preschool Foundations and Frameworks; the CPIN leads and training partners provide TA on them. R&Rs and CECMP mentors are trained on these documents and use them to inform their TA.
- Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe: The CalSAC conducts in person training and, with CCDF funding, developed eLearning Courses including 20 free courses.
- b) Indicate which funds are used for this activity (check all that apply)
 - □ CCDF funds. Describe All of the above are funded using CCDF funds, unless otherwise noted.
- 6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))
 - Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program

- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)
- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
- 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
- 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)

- 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
- 8) Supporting providers in the voluntary pursuit of accreditation
- 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

- 7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services
 - a. As a state that is participating in a deeper examination of the Institute of Medicine's "Transforming the Workforce for Children Birth through Age Eight: A Unifying Foundation", the CDE will review and examine the ways in which California can support its recommendations, with a particular focus on the following five recommendations:
 - 1. Support workforce development with coherent funding, oversight, and policies (Recommendation 10)
 - 2. Ensure that policies and standards that shape the professional learning of care and education leaders (elementary school principals and directors in early care and education settings) encompass the foundational knowledge and competencies needed to support high-quality practices for child development and early learning in their organizations. (Recommendation 8)
 - 3. Support comprehensive state and local-level efforts to transform the professional workforce for children from birth through age 8. (Recommendation 12)

- 4. Support the consistent quality and coherence of professional learning supports during ongoing practice for professionals working with children from birth through age 8. (Recommendation 6)
- Collaboratively develop and periodically update coherent guidance that is foundational across roles and settings for care and education professionals working with children from birth through age 8. (Recommendation 11)
- b. Establish an Early Childhood Leadership Academy, or similar effort, focusing of business practices, establishing an environment of continuous quality improvement, and the birth to third grade continuum.
- c. Support the development of a California QRIS, building on the efforts of the RTT–ELC, the State Preschool QRIS Block Grant, and the First 5 California IMPACT Initiative.
- d. Support the development of the California Workforce Registry statewide, building on the San Francisco and Los Angeles efforts, incorporating all child development permits, degrees, credentials, coursework and professional development training activities, and being compatible with K-12 workforce data.
- 7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:
 - ☑ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.
 - ☑ Indicate which funds will be used for this activity (check all that apply)
 - □ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) Infant/Toddler Targeted Funds
 - ☑ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) RTT–ELC funds, State Preschool QRIS Block Grant (\$50 million a year), one time Infant/Toddler QRIS Block Grant (\$24 million).
 - ☐ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, including whether designated infant- and toddler set aside, etc.) Infant/Toddler Targeted Funds
 - ☑ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) RTT–ELC funds, State Preschool QRIS Block Grant, one time Infant/Toddler QRIS Block Grant.

	Establishing If checked, ⊠	expanding a statewide system of CCR&R services as discussed in 1.7. bond to 7.4. licate which funds will be used for this activity (check all that apply) CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-ldler set aside, etc.) Other funds. Describe other funding sources (e.g., Race to the Topely Learning Challenge, state or local funds, etc.) State General Fund
	monitoring, checked, re	inpliance with State/Territory requirements for inspection, ining, and health and safety standards (as described in Section 5). If nd to 7.5. licate which funds will be used for this activity (check all that apply) CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-ldler set aside, etc.) CCDF Other funds. Describe other funding sources (e.g., Race to the Top thy Learning Challenge, state or local funds, etc.) State General Fund
	_	assessing the quality and effectiveness of child care services within . If checked, respond to 7.6. licate which funds will be used for this activity (check all that apply) CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-Idler set aside, etc.) Quality set aside Other funds. Describe other funding sources (e.g., Race to the Top cly Learning Challenge, state or local funds, etc.) RTT—ELC funds, State eschool QRIS Block Grant, one time Infant/Toddler QRIS Block Grant.
	Supporting	reditation. If checked, respond to 7.7. licate which funds will be used for this activity (check all that apply) CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant- Idler set aside, etc.) Other funds. Describe other funding sources (e.g., Race to the Top ly Learning Challenge, state or local funds, etc.)
	standards r	te/Territory or local efforts to develop high-quality program ing to health, mental health, nutrition, physical activity, and physical f checked, respond to 7.8. licate which funds will be used for this activity (check all that apply) CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
		Other funds. Describe other funding sources (e.g., Race to the Top ly Learning Challenge, state or local funds, etc.) RTT–ELC funds, State eschool QRIS Block Grant, one time Infant/Toddler QRIS Block Grant.

care s prepa	per activities determined by the State/Territory to improve the quality of child ervices, and for which measurement of outcomes related to improved provider redness, child safety, child well-being, or entry into kindergarten is possible. If ed, respond to 7.9.
	oxtimes Indicate which funds will be used for this activity (check all that apply)
	□ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) CCDF
	☑ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) State General Fund
7.2 Quality Ratin	g and Improvement System
7.2.1 Does yo	our State/Territory have a quality rating and improvement system (QRIS)?
	Yes, the State/Territory has a QRIS operating State/Territory-wide . Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available
Х	Yes, the State/Territory has a QRIS operating as a pilot, in 30 out of 58 counties, but not fully operating Statewide. http://www.cde.ca.gov/sp/cd/rt/ http://www.cde.ca.gov/sp/cd/op/csppqrisblockgrant.asp , and http://www.ccfc.ca.gov/programs/programs impact.html
	No, but the State/Territory is in the development phase
	No, the State/Territory has no plans for development
a)	If yes, check all that apply to your QRIS.
	X Participation is voluntary
	☐ Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)
	☐ Participation is required for all providers
	☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels
	X Supports and assesses the quality of child care providers in the State/Territory

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- X Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
- X Embeds licensing into the QRIS. Describe Licensed and in good standing is the first Tier for all QRIS rated sites.
- X Designed to improve the quality of different types of child care providers and services
- X Describes the safety of child care facilities
- X Addresses the business practices of programs
- X Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
- X Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality. California State Legislature has invested an additional \$50 million in QRIS annually specifically earmarked to enhance state preschool programs and bring them to a 4 or 5 star rating in the QRIS. This includes coaching, training, and financial incentives. Additionally, the Budget Act of 2015 included one-time funding of \$24 million to create the Infant Toddler QRIS block grant as described in section 4.3.4.
- X Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating
- b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.
 - X Licensed child care centers
 - X Licensed family child care homes
 - ☐ License-exempt providers
 - X Early Head Start programs
 - X Head Start programs

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- X State pre-kindergarten or preschool program
- X Local district supported pre-kindergarten programs
- X Programs serving infants and toddlers
- ☐ Programs serving school-age children
- X Faith-based settings
- X Other. Describe. Tribal, military, and other programs exempt from licensure that meet the licensing health and safety standards.
- 7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

California's RTT-ELC grant includes a validity evaluation of the rating matrix and an outcomes evaluation to measure its effectiveness. Each of the CCDF professional development systems are evaluated periodically to determine their effectiveness in improving practice.

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

- 7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.
 - X Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, ageappropriate care to infants and toddlers from low-income families. Describe:

 The CDE has a contracting process that allows the state to contract with public and private agencies to provide high-quality early care and education services. LPCs in each county provide priority data so that new funds can be directed to high priority communities.
 - X Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe:

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The CDE has a contracting process that allows the state to contract with public and private agencies to establish family child care home education networks provide high quality early care and education services. LPCs in each county provide priority data so that new funds can be directed to high priority communities.

X	Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe: The CCIP has a focus in assisting family child care providers to provide infant/toddler care.
	Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe
Χ	Providing coaching and/or technical assistance on this age group's unique

- X Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists. Describe:
 - California utilizes the PITC Regional Partners for Quality to have a system of qualified infant-toddler specialists. These Partners have a system to extend their reach to certification process for additional trainers that are part of their service deliver, but who are not on their staff.
- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) Describe:

 The CDE engages with its Part C partners at the CDDS. A representative from its TA system is a member of the state ECE Professional Learning Team.
- X Developing infant and toddler components within the State's/Territory's QRIS. Describe: The CDE, as the lead for California's RTT-ELC, has embedded its Infant/Toddler Learning and Development Foundations and Curriculum Framework and its aligned child observational assessment, the DRDP into the RTT-ELC QRIS. Additionally, the Budget Act of 2015 included one-time funding of \$24 million to create the Infant Toddler QRIS block grant as described in section 4.3.4.
- X Developing infant and toddler components within the State/Territory's child care licensing regulations. Describe: Developed: DSS Community Care Licensing requires 6 units in Infant/Toddler course work to work as an Infant/Toddler teacher.
- X Developing infant and toddler components within the early learning and development guidelines. Describe:
 - The CDE has developed *Infant/Toddler Learning* and *Development Foundations*, a *Curriculum Framework*, and *Program Guidelines* with companion DVDs and online modules.

- X Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe: California has a robust system of R&Rs dedicated to provide consumer education about high-quality early care and education. To strengthen their work, consumer education modules for R&R phone counselors will be developed in the next fiscal year.
- X Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe: California supports the PITC demonstration sites at several community colleges across the state to provide an opportunity to observe high-quality infant/toddler care. California has adopted the teaching pyramid principles of CSEFEL and provides training on the infant/toddler modules. As part of RTT-ELC, the community colleges are creating three aligned infant/toddler courses for use across the system.

Other.	Describe	

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory

The CDSS is able to track the number of infant centers that are licensed and identify if there is a growth in capacity. LPCs periodically conduct a needs assessment to determine the need for infant/toddler care; this information is used to guide the awarding of contracts to meet communities' need for infant/toddler care. Local R&Rs track the need for services by the age of the child. The California Child Care R&R Network periodically releases a state and county level Child Care Portfolio that describes the status of child care. Local QRIS track program improvement and increases in quality levels with information about the ages of the children served.

7.4 Child Care Resource & Referral

- 7.4.1 Describe the status of the child care resource and referral system
 - X State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system

California has an extensive CCR&R history dating back to 1976. There are 71 R&R operating throughout California. Since 1980, the California Child Care Resource & Referral Network has supported its member resource and referral (R&R) programs across the state, while playing a lead role in helping create awareness about child care issues locally and statewide. The Network - a 501(c)(3) nonprofit organization - is based in San Francisco, with satellite

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offices in Los Angeles, Chico, and Sacramento. The organization promotes affordable, accessible, quality child care by:

- Collecting, analyzing, and disseminating data on child care, including publishing the biennial California Child Care Portfolio, a county-bycounty and statewide report on child care supply, demand, and costs related to local and statewide demographics
- Educating policymakers, community leaders, and other decision makers about child care issues
- Conceiving and implementing innovative programs such as the CCIP that increase the supply and capacity of child care providers to deliver quality care
- Supporting parents through programs such as Parent Voices, to advocate for their children
- Producing informative materials and curricula for parents and diverse child care providers, such as *Growing*, *Learning*, *Caring* and *Cuatro Pasos*
- Managing TrustLine, California's criminal and child abuse background check system, for in-home and license-exempt child care providers

	State/Territory has a CCR&R system operating in a few localities but not fully
	operating State/Territory-wide. Describe
_	6 / -
Ш	State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

R&R agencies are under contract with the CDE and subject to periodic monitoring to ensure compliance to statutory and regulatory requirements. The CDE engaged an independent evaluation of technical assistance (TA) and professional development (PD) activities conducted by California's R&R which took place from May 1, 2013 through June 20, 2014. The research areas evaluated which TA and PD services were provided through local R&Rs and who was participating in these activities, and strived to determine the level of improvement in the quality of child care provided after receiving PD training.

7.5. Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing

standards? Describe: Annually, \$8 million in CCDF quality funds are provided from the CDE to CDSS to help meet inspection and monitoring of State licensing standards.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: As more counties adopt a QRIS, this can be used to measure improvement in child care quality.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

- 7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children
 - The CDE/EESD, has established the Desired Results System to improve program quality in its early care and education programs across the state. This system has several components to address all aspects of program quality: DRDP (2015) for child assessment, the ERS tool appropriate for the site/setting type, a Parent Survey, and a Program Self-Assessment which utilizes a Summary of Findings from the program's DRDP results, the ERS results, and the Parent Survey. For non-EESD-contracted programs, this is complimented by the Quality Continuum Framework, its Rating Matrix, and Continuous Quality Improvement Pathways that is used by the RTT-ELC QRIS Consortia, the State Preschool QRIS Block Grant Consortia, and the First 5 California IMPACT Consortia. These are local consortia focused on QRIS and blending the various funding opportunities.
- 7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory
 - The RTT-ELC evaluation and the semi-annual data submission will provide data on the progress that has been made over the life of the RTT-ELC grant. In the subsequent grants: the State Preschool QRIS Block Grant and the First 5 California IMPACT grant, similar data will be collected to demonstrate increased participation of early learning programs in these quality improvement efforts, as well as, increased numbers of children with high needs being served in higher quality programs over time. The CDE and First 5 California will continue to collect and analyze the data.

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

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	Ц	the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation
		Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe
		No, but the State/Territory is in the development phase
	Х	No, the State/Territory has no plans for development Accreditation is an optional way to earn 5 points in Element 6 of the QRIS Rating Matrix.
7.7.2	evaluat	be the measures relevant to this activity that the State/Territory will use to the State/Territory's progress in improving the quality of child care programs rvices in the State/Territory

7.8 Program Standards

- 7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe: The CDE has developed the following program guidelines: Infant/Toddler Learning and Development Program Guidelines (2006) Guidelines for Early Learning in Child Care Home Settings (2010), and Preschool Program Guidelines (2015). These are fully-aligned to the state's early learning guidelines, i.e., the Foundations, and provide guidance on providing developmentally appropriate early care and education. The Infant/Toddler and Preschool Guidelines have companion DVDs to support understanding and utilization of the concepts. The CDE will develop online overview modules for CECO to support use of these guidelines.
- 7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: The CDE utilizes EESD Field Services consultants who monitor direct-service programs under contract with the CDE. These consultants review the programs annual performance documents as well as conducting onsite monitoring and TA. The RTT-ELC pilot has established local QRIS which are transforming into sustainable systems with the Legislative infusion of \$50 million in State Preschool QRIS Block Grants and First 5 CA's system's funding. The CDE will be able to measure progress as more centers and child care homes move to higher rated levels of quality.

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

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a. Quality Improvement Activity 1: Beginning Together: Inclusion of Infants and Toddlers with Disabilities: The Beginning Together project ensures that information about children with special needs is incorporated and appropriate inclusive practices are promoted in the training and technical assistance provided by certified trainers for the PITC. Beginning Together is designed to move inclusive experiences for young children with disabilities or other special needs and their families from theory into practice. This is accomplished through a training-of-trainers institute, a seminar for community colleges, regional technical assistance activities, support to institute graduates, and support of inclusive practices in other PITC activities, including a Beginning Together advanced TA institute.

The various institutes and academies offered continue to build a cadre of qualified trainers who are available to assist local child care providers in complying with the requirements of the Americans with Disabilities Act by creating inclusive environments. The PITC infant/toddler specialists and coordinators receive TA to support them in creating linkages with early interventionists and infant/toddler child care programs at the local level. Outreach sessions are conducted throughout the state each year to bring together PITC trainers, infant/toddler staff, family child care providers, early interventionists, and other professionals working with children with disabilities and other special needs and their families to discuss strategies for local coordination of services. The PITC college demonstration programs also receive training and technical assistance.

http://www.cainclusion.org/bt

Measure to Evaluate: More infants and toddlers with IFSPs will be served in community-based settings, improving their opportunities for development.

b. Quality Improvement Activity 2: California Collaborative for Social and Emotional Foundations of Early Learning (CSEFEL): The CA CSEFEL Teaching Pyramid approach was built on the Positive Behavior Interventions and Support (PBIS) model with the incorporation of quality early childhood practices. WestEd Center for Child & Family Studies has further adapted the approach to incorporate the "facilitative administrative practices" as described in research documents. The power of the CA CSEFEL Teaching Pyramid is most clearly seen when it is implemented across an entire site, district, or agency (i.e., program-wide). There are six recommended components for achieving a program-wide approach: 1) planning by a group of leaders, 2) training in a systematic way, 3) coaching/technical assistance to support implementation to fidelity, 4) incorporation of family engagement to strengthen the link between home and school, 5) identification and training of those responsible for the development of positive behavior support plans, and 6) follow-up for sustainability after training ends.

http://cainclusion.org/camap/cacsefel.html

Measure to Evaluate: Sites implementing CSEFEL to fidelity will have reduced instances of expulsions, fewer children inappropriately referred for special education services, and more children confident and ready to enter kindergarten. A CSEFEL evaluation is currently underway.

c. Quality Improvement Activity 3: California Early Childhood Mentor Program: Mentor activities are provided at 100 community college campuses to support experienced teachers and directors and encourage them to remain in the field of early childhood education. Financial compensation and professional development support are provided to more than 640 child care and development teachers and 145 directors who have been selected as mentors. Mentor Teacher applicants must complete a self-assessment of their classroom, and their program director must agree to conditions of their participation. Candidates for Director Mentor attend an orientation webinar and a full-day training in mentoring techniques to qualify to apply. A local selection committee convened each academic year by the community college chooses mentor teachers and directors. The average stipend per classroom mentor is estimated to be approximately \$1,600 per year. More than 2,100 early childhood education students will be provided with alternative placements for practicum experiences and mentoring support to achieve their academic goals and over 90 director protégés will receive support in improving their program leadership and management skills.

https://www.ecementor.org/

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements. Lacking final federal guidance, it is unclear if California's current law and regulation comply with the changes referenced in this section.

Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply. Lacking final federal guidance, it is unclear if California's current law and regulation comply with the changes referenced in this section.
☐ Issue policy change notices
☐ Issue new policy manual
 □ Staff training □ Orientations □ Onsite training □ Online training
Regular check-ins to monitor implementation of the new policies. Describe
Other. Describe In order to ensure local agency compliance with changes to federal law, the CDE drafts management bulletins that define the new regulations and clearly outline the new reporting requirements. The management bulletins are posted on the CDE Web site and agencies are notified of the new management bulletins via e-mail that includes a link to the management bulletin. The CDE has designated personnel who are available by phone and e-mail to provide technical assistance to the local agencies. In addition, CDE personnel attend regional conferences to provide training to agency staff to help improve data accuracy. CDE personnel attend ongoing training activities in order to remain informed about federal and state reporting requirements and maintain adequate
programming and data analysis skills. The software packages used for data

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements. The CDE maintains overall

analysis and programming are annually updated to ensure that CDE personnel have the resources necessary for efficient data analysis and timely reporting.

control and the following oversight responsibilities:

- a. Negotiation, issuance, and execution of contracts, grants, or interagency agreements.
- b. Provides TA to contractors, grantees, and public agencies.
- c. Monitoring of fiscal and service data reports required to be submitted by contractors, grantees, or other public agencies for final close—out of

contracts and grants. State agencies are audited by the Bureau of State Audits.

- d. Contractor Reviews:
 - Review of each child care and development service contractor at the local level by the CDE or other authorized representative using the following procedures:
 - i. Agency annual self-review
 - ii. Categorical Program Monitoring (CPMs)/Contract Monitoring Reviews (CMRs) of each school or contracted program.
 - iii. Sampling and review of individual agencies to estimate and reduce error rates.
 - iv. Enforcement of requirements.
 - 2. Review of contractors or grantees providing quality improvement activities encompass the following tasks:
 - i. Review of monthly invoices and progress reports.
 - For those producing materials, review and approval of materials during development and prior to final production.
 - iii. For those conducting training, review of training plan, observation of training activities, and review of client evaluations of training activities.
 - iv. Contract for periodic independent evaluations of the efficiency and effectiveness of all major quality improvement activities.
 - 3. Review of Alternative Payment Program (APP) contractors conducted on an annual basis.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors"). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

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a)

The CDE has two teams working full-time reviewing files, identifying administrative errors, and assisting sub-recipients in crafting and implementing error rate reduction plans. Agency specific error rate estimates have been successful in identifying issues that impact future statewide estimates and reducing the instance of error. For all sub-recipients, an annual independent audit is required and reviewed by the CDE.

Actions taken: on-site reviews of sub-recipients to estimate and reduce errors, follow-up reviews to assess effective implementation of error rate reduction plans, and review of annual agency audits and completion of on-site audits of high-risk contractor by CDE auditors.

	which activities the Lead Agency has chosen to conduct to identify ntional or intentional program violations.
	Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
	Run system reports that flag errors (include types). Describe
\boxtimes	Review of enrollment documents, attendance or billing records
	Conduct supervisory staff reviews or quality assurance reviews
\boxtimes	Audit provider records
\boxtimes	Train staff on policy and/or audits
cra err fut	Other. Describe The CDE has two teams working full-time reviewing s, identifying administrative errors, and assisting sub-recipients in fting and implementing error rate reduction plans. Agency specific or rate estimates have been successful in identifying issues that impact ure statewide estimates and reducing the instance of error. For all sub-ipients, an annual independent audit is required and reviewed by the E.
err red	cions taken: on-site reviews of sub-recipients to estimate and reduce ors, follow-up reviews to assess effective implementation of error rate fluction plans, and review of annual agency audits and completion of esite audits of high-risk contractor by CDE auditors.
	None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines

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b) Check w administra	hich activities the Lead Agency has chosen to conduct to identify tive error.
	Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
	Run system reports that flag errors (include types). Describe
	Review of enrollment documents, attendance or billing records
	Conduct supervisory staff reviews or quality assurance reviews
\boxtimes	Audit provider records
\boxtimes	Train staff on policy and/or audits
	Other. Describe
	None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines
and collect imp defined in you	s (or describe under "Other") the Lead Agency will use to investigate proper payments due to program violations or administrative error as a State/Territory? The Lead Agency has the flexibility to recover as as a result of errors. The Lead Agency is required to recover misspent of fraud.
	which activities (or describe under "Other") the Lead Agency will use ntentional program violations? Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount
	Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
	Recover through repayment plans
	Reduce payments in subsequent months
	Recover through State/Territory tax intercepts
	Recover through other means

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	Describe
	☐ Other. Describe
	None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines The CDE has two teams working full-time reviewing files, identifying administrative errors, and assisting sub-recipients in crafting and implementing error rate reduction plans. Agency specific error rate estimates have been successful in identifying issues that impact future statewide estimates and reducing the instance of error. For all sub-recipients, an annual independent audit is required and reviewed by the CDE.
	Actions taken: on-site reviews of sub-recipients to estimate and reduce errors, follow-up reviews to assess effective implementation of error rate reduction plans, and review of annual agency audits and completion of on-site audits of high-risk contractor by CDE auditors.
b)	Check which activities the Lead Agency will use for intentional program violations or fraud? ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount
	□ Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
	☑ Recover through repayment plans
	☐ Reduce payments in subsequent months
	☑ Recover through State/Territory tax intercepts
	☐ Recover through other means
	 Establish a unit to investigate and collect improper payments. Describe composition of unit below
	☑ Other. Describe Provide training/best practices in identifying potential fraud cases. Increasing clarity of program rules to prevent fraud.
	☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines

C)	Check	which activities the Lead Agency will use for administrative error? Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount
		Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
		Recover through repayment plans
		Reduce payments in subsequent months
		Recover through State/Territory tax intercepts
		Recover through other means
		Establish a unit to investigate and collect improper payments. Describe composition of unit below
		Other. Describe
	to a add CD add implest sta	None. Describe what measures the Lead Agency plans to put in place address the investigation and recovery of misspent funds due to ministrative error, including action steps and completion timelines The E has two teams working full-time reviewing files, identifying ministrative errors, and assisting sub-recipients in crafting and plementing error rate reduction plans. Agency specific error rate imates have been successful in identifying issues that impact future tewide estimates and reducing the instance of error. For all sub-ipients, an annual independent audit is required and reviewed by the E.
	err	cions taken: on-site reviews of sub-recipients to estimate and reduce ors, follow-up reviews to assess effective implementation of error rate fluction plans, and review of annual agency audits and completion of

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

on-site audits of high-risk contractor by CDE auditors.

☑ Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. The parent is provided a Notice of Action (NOA), termination of services. The NOA informs the parent of the following: The parent may appeal the NOA to the contractor and, if necessary, to the EESD within a 14/19 day timeframe. Termination of serviced is suspended

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during the appeal process. The EESD reimburses the contractor for services provided to the family during the appeal process.

	Disqualify provider. If checked, please describe, including a description of the peal process for providers who are disqualified. No appeal.
\boxtimes	Prosecute criminally
	Other. Describe